Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ALABAMA	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this is an amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Jerry First name  Dawson Middle name  Freeman Last name and Suffix (Sr., Jr., II, III)	Savanna First name  Nicole Middle name  Freeman  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names and any assumed, trade names and doing business as names.  Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.	Jerry D Freeman Jerry Freeman	Savanna N Freeman Savanna Freeman Savanna Foster Savanna Nicole Foster Savanna Foster Freeman
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9055	xxx-xx-8984

Debtor 1 Jerry Dawson Freeman
Savanna Nicole Freeman

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Your Employer Identification Number (EIN), if any.		
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		15632 Twin Creek Drive Buhl, AL 35446	
		Number, Street, City, State & ZIP Code  Tuscaloosa	Number, Street, City, State & ZIP Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 2 **Savanna Nicole Freeman** Case number (if known) Tell the Court About Your Bankruptcy Case 7. Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When District Case number When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being ☐ Yes. filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1

**Jerry Dawson Freeman** 

	otor 1 Jerry Dawson Fre Savanna Nicole F				Case number (if known)
Pari	t3: Report About Any Bu	usinesses	You Own	as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numbe	er, Street, City, Stat	e & ZIP Code
	it to this petition.		Check	the appropriate bo	x to describe your business:
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
				None of the above	3
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor?	deadline operation	s. If you in	dicate that you are a ow statement, and for	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small business debtor, see 11	■ No.	I am n	ot filing under Chap	ter 11.
	U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and under Subchapter V of Chapter 11.
		☐ Yes.	I am fi I choo	ling under Chapter se to proceed under	11, I am a small business debtor according to the definition in the Bankruptcy Code, an r Subchapter V of Chapter 11.
Part	t 4: Report if You Own or	r Have Any	/ Hazardo	us Property or Any	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat	☐ Yes.			
	of imminent and	<b>□</b> 165.	What is t	he hazard?	
	identifiable hazard to public health or safety?				
	Or do you own any property that needs immediate attention?			ate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
					Number, Street, City, State & Zip Code

Debtor 1 Debtor 2

**Jerry Dawson Freeman** Savanna Nicole Freeman

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 2 Savanna Nicole F				Case number	(if known)
Par	t 6: Answer These Quest	ions for R	eporting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily co individual primarily for a personal primari			ed in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.	Are your debts primarily bu money for a business or investigation			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you ov	we that are not consu	mer debts or business	s debts
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter	7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. D are paid that funds will be ava			rty is excluded and administrative expense
	administrative expenses		□ No			
	are paid that funds will be available for		□Yes			
	distribution to unsecured creditors?					
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000	)	<b>2</b> 5,001-50,000
	you estimate that you owe?	□ 50-99		☐ 5001-10,00		☐ 50,001-100,000
		☐ 100-1 ☐ 200-9		☐ 10,001-25,0	000	☐ More than100,000
19.	How much do you	<b>■</b> \$0 - \$	\$50,000	□ \$1,000,001		☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		001 - \$100,000	□ \$10,000,00	1 - \$50 million 1 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
			,001 - \$500,000 ,001 - \$1 million		01 - \$500 million	☐ More than \$50 billion
20.	How much do you	<b>\$0 - \$</b>	\$50,000	□ \$1,000,001		□ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,00	1 - \$50 million 1 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
			,001 - \$500,000 ,001 - \$1 million		1 - \$100 million 01 - \$500 million	☐ More than \$50 billion
Por	t 7: Sign Below	<b>—</b> \$0000	, oo i			
Par	you	I have e	xamined this petition, and I decl	lare under penalty of	periury that the inform	ation provided is true and correct.
	,		•			·
						under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.
			orney represents me and I did n nt, I have obtained and read the			an attorney to help me fill out this
		I reques	t relief in accordance with the cl	hapter of title 11, Unit	ed States Code, spec	ified in this petition.
		I underst bankrupt and 357	tcy case can result in fines up to	concealing property, p \$250,000, or imprise	or obtaining money or onment for up to 20 ye	property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519
			y Dawson Freeman		/s/ Savanna Nicole I	
			awson Freeman e of Debtor 1		Signature of Debtor	
		Execute	, , , , , , , , , , , , , , , , , , , ,		Executed on Jan	
			MM / DD / YYYY		MM /	DD / YYYY

Debtor 1 **Jerry Dawson Freeman**Debtor 2 **Savanna Nicole Freeman** 

Case nur	nber	(if know	n)
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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Andrew	/ D. Poston	Date	January 22, 2025
Signature of	Attorney for Debtor		MM / DD / YYYY
Andrew D.	Poston POS015		
Printed name			
<b>Brock and</b>	Stout		
Firm name			
PO Box 31	1167		
<b>Enterprise</b>	, AL 36331		
Number, Street,	City, State & ZIP Code		
Contact phone	(334) 393-4357	Email address	bankruptcy@brockandstout.com
POS015 AI	L		
Bar number & St	ate		<del></del>

					1/22/25 11:07A
Fill in this infor	mation to identify you	r case:			
Debtor 1	Jerry Dawson Fr	eeman			
	First Name	Middle Name	Last Name		
Debtor 2	Savanna Nicole	Freeman			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ALABAMA		
Case number					
(if known)					Check if this is an amended filing
-					3
Official Fo	orm 106Sum				
Summary of	of Your Assets	and Liabilities an	nd Certain Statistical Information	on	12/15
•			are filing together, both are equally responsi ne information on this form. If you are filing ar		

your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	210,780.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	49,049.49
	1c. Copy line 63, Total of all property on Schedule A/B	\$	259,829.49
Par	rt 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	214,926.85
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	65,047.26
	Your total liabilities	\$	279,974.11
Par	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	8,063.33
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,671.00
Par	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

the court with your other schedules.

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Debtor 1 **Jerry Dawson Freeman**Debtor 2 **Savanna Nicole Freeman** 

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

10,296.94

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	36,084.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	36,084.00

									/25 11:07
Fill in t	this informatio	n to identify	your case and th	nis filing	g:				
Debtor			n Freeman						
Dobtor		rst Name		e Name	Last Name				
Debtor (Spouse,		<b>avanna Nic</b> rst Name	cole Freeman	e Name	Last Name				
	-	tou Count for	that NODTHED	N DIST	RICT OF ALABAMA				
United	States Bankrup	olcy Court for	ine. NORTHER	וופוטאו	RICT OF ALABAMIA				
Case n	number							☐ Check if the amended f	o .o a.
Offic	ial Form	1064/F	<b>R</b>						
	edule A		_					12/15	
think it f informat	its best. Be as of tion. If more space every question.	complete and a	accurate as possibl attach a separate sl	le. If two heet to th	only once. If an asset fits in more than on married people are filing together, both are his form. On the top of any additional page  Estate You Own or Have an Interest In	e equally respo	nsible for su	pplying correct	-
_		iny legal or eq	uitable interest in a	iny resid	lence, building, land, or similar property?				
	o. Go to Part 2.								
■ Ye	es. Where is the p	property?							
■ Ye	es. Where is the p	oroperty?		What	: is the property? Check all that apply				
1.1	es. Where is the p	. ,		What	is the property? Check all that apply Single-family home	Do not dedu	ct secured cla	aims or exemptions	Put
1.1 	·	eek Drive	cription	What ■ □		the amount of	of any secure	aims or exemptions d claims on Schedu ms Secured by Prop	ıle D:
1.1 	5632 Twin Cr	eek Drive	cription	■	Single-family home  Duplex or multi-unit building	the amount of	of any secure	d claims on <i>Schedu</i>	ıle D:
1.1 	5632 Twin Cr	eek Drive	scription 35446-0000	■	Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of	of any secure ho Have Clain ue of the	d claims on <i>Schedu</i>	ile D: perty.
1.1 	5632 Twin Cr reet address, if avails	r <b>eek Drive</b> able, or other des		■	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current valuentire prope	of any secure ho Have Clain ue of the	d claims on Schedums Secured by Prop Current value o	ile D: perty. f the
1.1 15 Str	5632 Twin Cr reet address, if avails	reek Drive able, or other des AL	35446-0000	■	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Current valuentire proper	of any secure the Have Clain use of the erty?	d claims on Schedums Secured by Prop Current value of portion you own \$210,7	the D: f the n? 80.00
1.1 15 Str	5632 Twin Cr reet address, if avails	reek Drive able, or other des AL	35446-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other	Current valuentire prope \$210  Describe the (such as fee	of any secure the Have Clain  ue of the lefty?  0,780.00  e nature of ye simple, ten	d claims on Schedums Secured by Prop Current value of portion you own	tle D: perty. If the n? 180.00
1.1 15 Str	5632 Twin Cr reet address, if avails	reek Drive able, or other des AL	35446-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check one	Current valuentire prope \$210  Describe the (such as fee a life estate)	of any secure the Have Clain  ue of the lefty?  0,780.00  e nature of ye simple, ten	cour ownership int	tle D: perty.  f the n?  680.00
1.1 19 Std	5632 Twin Cr reet address, if avails	reek Drive able, or other des AL	35446-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current valuentire prope \$210  Describe the (such as fee	of any secure the Have Clain  ue of the lefty?  0,780.00  e nature of ye simple, ten	cour ownership int	tle D: perty.  f the n?  680.00
1.1	5632 Twin Cr reet address, if availa suhl ty	reek Drive able, or other des AL	35446-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current valuentire proper \$210  Describe the (such as fee a life estate JTWROS	of any secure the Have Clain use of the erty?  0,780.00  e nature of ye simple, ten ), if known.	current value or portion you own \$210,7	tle D: perty.  f the n?  680.00
1.1	5632 Twin Cr reet address, if avails suhl ty	reek Drive able, or other des AL	35446-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current valuentire proper \$210  Describe the (such as fee a life estate JTWROS	of any secure the Have Clair use of the serty? 0,780.00 e nature of yes simple, ten y, if known.	cour ownership int	tle D: perty.  f the n?  680.00
1.1 15 Str	5632 Twin Cr reet address, if avails suhl ty	reek Drive able, or other des AL	35446-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current valuentire prope \$210  Describe the (such as fee a life estate JTWROS	of any secure the Have Clair use of the lefty?  0,780.00 e nature of ye simple, ten h, if known.	current value or portion you own \$210,7	tle D: perty.  f the n?  680.00
1.1 15 Str	5632 Twin Cr reet address, if avails suhl ty	reek Drive able, or other des AL	35446-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this ite	the amount of Creditors Will  Current valuentire proper \$210  Describe the (such as fee a life estate JTWROS  Check (see instruction)  Check (see instruction)  Check (see instruction)  The check (see instruction)	of any secure the Have Clair  ue of the enty?  0,780.00  e nature of ye simple, ten ), if known.	d claims on Schedums Secured by Properties Secured by Properties Secured by Properties Secured by Properties Secured by Secured Secure	tle D: perty.  f the n?  680.00
1.1 1.1 B Cit	5632 Twin Cr reet address, if availa suhl ty uscaloosa punty	AL State	35446-0000 ZIP Code	Who Other prope	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another or information you wish to add about this ite erty identification number: tax appriased value is \$ 234,200.6	Current valuentire proper \$210  Describe the (such as fee a life estate JTWROS  Check (see instrument, such as location). The tax appearse is \$	of any secure the Have Clair  ue of the enty?  0,780.00  e nature of ye simple, ten ), if known.	d claims on Schedums Secured by Properties Secured by Properties Secured by Properties Secured by Properties Secured by Secured Secure	the D: f the f? f80.00 erest ties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debt Debt		Jerry Dawso Savanna Nic	on Freeman cole Freeman		Case number (if known)	
3. <b>C</b> a	ars, vans	, trucks, trac	tors, sport utility ve	hicles, motorcycles		
П	No					
_						
-	Yes					
		Chavrala	4		Do not deduct secu	red claims or exemptions. Put
3.1	Make:	Chevrole	<u> </u>	Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
	Model:	Tahoe		Debtor 1 only	Creditors Who Hav	e Claims Secured by Property.
	Year:	2019		Debtor 2 only	Current value of the	he Current value of the
		mate mileage:	44,000 +	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:		At least one of the debtors and another		
				Check if this is community property (see instructions)	\$31,203.	\$31,203.00
				(see instructions)		
	No Yes				r	
				rn for all of your entries from Part 2, including that number here		\$31,203.00
					L	
Part:	3: Descr	ibe Your Perso	nal and Household It	ems		
-		or have any l		terest in any of the following items?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
E	<i>xamples:</i> No		nces, furniture, linens	, china, kitchenware		
			MISC HOUSEHO	OLD GOODS & FURNISHINGS		\$2,500.00
E	l No	Televisions a		eo, stereo, and digital equipment; computers, pri nedia players, games CTRONICS	inters, scanners; music co	ollections; electronic devices
E	xamples:		figurines; paintings, ons, memorabilia, co	prints, or other artwork; books, pictures, or other llectibles	r art objects; stamp, coin,	or baseball card collections;
E	xamples:	Antiques and other collection	ons, memorabilia, co		r art objects; stamp, coin,	
. <b>E</b> c	No Yes. De quipment xamples:	Antiques and other collectivescribe	BOOKS AND FA	İlectibles		\$275.00
9. <b>E</b> c	No Yes. De quipment xamples:	Antiques and other collectivescribe	BOOKS AND FA	AMILY PICTURES		\$275.00

Debtor 1 Debtor 2	Jerry Dawson Freeman Savanna Nicole Freeman	Case number (if k	nown)
20010. 2	Ouvanna Nicole i recinan		
10. Firearı	ms		
-	ples: Pistols, rifles, shotguns, ammunition, and re	lated equipment	
■ No			
☐ Yes.	Describe		
11. Clothe			
<i>Exam<sub>l</sub></i> □ No	ples: Everyday clothes, furs, leather coats, design	ner wear, shoes, accessories	
	Describe		
<b>—</b> 165.	Describe		
	<b>EVERYDAY WEARING A</b>	PPAREL	\$850.00
□ No	ples: Everyday jewelry, costume jewelry, engager  Describe	ment rings, wedding rings, heirloom jewelry, watches, ge	
	MISC FASHION JEWELR	Υ	\$275.00
Exam <sub>l</sub> □ No	arm animals  ples: Dogs, cats, birds, horses  Describe		
	1 cat		\$25.00
	1 Cat		<u> </u>
■ No □ Yes.	Give specific information	t already list, including any health aids you did not l	
	the dollar value of all of your entries from Part art 3. Write that number here	t 3, including any entries for pages you have attache	\$4,725.00
Part 4: De	escribe Your Financial Assets		
	wn or have any legal or equitable interest in ar	nv of the following?	Current value of the
	,	,	portion you own? Do not deduct secured claims or exemptions.
□ No	ples: Money you have in your wallet, in your home	e, in a safe deposit box, and on hand when you file your	petition
		CASH ON	\$25.00
		HAND	\$25.00
	sits of money ples: Checking, savings, or other financial accoun institutions. If you have multiple accounts wi	nts; certificates of deposit; shares in credit unions, broke ith the same institution, list each.	rage houses, and other similar
■ Yes.		Institution name:	
	17.1. Checking Accoun	Sutton Bank	\$300.00
-			

	ebtor 1 ebtor 2	Jerry Dawson Savanna Nice			Case number (if known)	
			17.2.	CHECKING ACCOUNT BALANCE	Alabama Credit Union	\$40.00
			17.2.	BALANCE	/ I a b a l a l a l a l a l a l a l a l a l	ψ.ο.οο
			17.3.	Savings	Alabama Credit Union	\$3.00
			17.4.	Checking	Cashapp	\$21.70
			17.5.	Checking	Cashapp	\$10.57
18.		, <b>mutual funds, c</b> ples: Bond funds,			age firms, money market accounts	
	■ No	,				
	☐ Yes.			Institution or issuer nam	ne:	
19.	joint v	ublicly traded sto enture	ock and	interests in incorporat	ed and unincorporated businesses, including an interest in an LLC	, partnership, and
	■ No	Give specific info	rmation	about them		
	<b>□</b> 163.	Give specific fillo		ne of entity:	% of ownership:	
20.	Negot	iable instruments i	include p	ersonal checks, cashier	ole and non-negotiable instruments 's' checks, promissory notes, and money orders. er to someone by signing or delivering them.	
	■ No					
	⊔ Yes.	Give specific info		about them uer name:		
		ment or pension ples: Interests in If			b), thrift savings accounts, or other pension or profit-sharing plans	
	■ Yes.	List each account		ely. of account:	Institution name:	
			EMPI 401K	LOYER FUNDED	Retirement Systems of Alabama	\$12,421.22
22.	Your s		d deposit	s you have made so tha	It you may continue service or use from a company lic utilities (electric, gas, water), telecommunications companies, or othe	rs
					Institution name or individual:	
23.	Annuit ■ No	ties (A contract for	r a perio	dic payment of money to	you, either for life or for a number of years)	
	☐ Yes.	lss	uer nam	e and description.		
		ts in an educatio C. §§ 530(b)(1), 5			fied ABLE program, or under a qualified state tuition program.	
	☐ Yes.	Ins	stitution r	name and description. Se	eparately file the records of any interests.11 U.S.C. § 521(c):	
		, equitable or fut	ure inte	rests in property (other	r than anything listed in line 1), and rights or powers exercisable fo	r your benefit
	■ No □ Yes.	Give specific info	ormation	about them		

Debtor Debtor		Savanna Nicole Freeman	Case number (if known)			
	kampl	copyrights, trademarks, trade secrets, and other intellectual pes: Internet domain names, websites, proceeds from royalties and				
	es. (	Give specific information about them				
<i>E</i> > ■ N	kampl No	s, franchises, and other general intangibles es: Building permits, exclusive licenses, cooperative association ho	oldings, liquor licenses, professional licenses			
Money	y or p	roperty owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.		
28. <b>Ta</b> :		ands owed to you				
	res. G	Sive specific information about them, including whether you already	filed the returns and the tax years			
Ex I	kampl No	support es: Past due or lump sum alimony, spousal support, child support, live specific information	maintenance, divorce settlement, property sett	lement		
E> ■ N	30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else  ■ No  Yes. Give specific information					
	kampl	s in insurance policies es: Health, disability, or life insurance; health savings account (HSA	A); credit, homeowner's, or renter's insurance			
	res. N	lame the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:		
		Amercian Fidelity ( Term Life)		\$0.00		
If y	you ai meon No	erest in property that is due you from someone who has died re the beneficiary of a living trust, expect proceeds from a life insurate has died.  Give specific information	ance policy, or are currently entitled to receive	property because		
Ex I	kampl No	against third parties, whether or not you have filed a lawsuit or es: Accidents, employment disputes, insurance claims, or rights to Describe each claim				
34. <b>Otl</b>		ontingent and unliquidated claims of every nature, including co	ounterclaims of the debtor and rights to set	off claims		
	res. [	Describe each claim				
35. <b>An</b>	-	ncial assets you did not already list				
		Give specific information				

	tor 1 tor 2	Jerry Dawson Freeman Savanna Nicole Freeman		Case number (if known)	
36.		ne dollar value of all of your entries from Part 4, includir rt 4. Write that number here			\$12,821.49
Part	5: Des	scribe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	ate in Part 1.	
37. D	o you o	wn or have any legal or equitable interest in any business-relat	ted property?		
	No. Go	to Part 6.			
	Yes. G	o to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.	ı Own or Have an Intere	st In.	
46. <b>[</b>	Do you	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	■ No. (	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
	Examp I No	have other property of any kind you did not already list les: Season tickets, country club membership  Give specific information			
		LAWN EQUIPMENT & TOOLS			\$300.00
54.		ne dollar value of all of your entries from Part 7. Write th	nat number here		\$300.00
55.	Part 1	: Total real estate, line 2			\$210,780.00
		: Total vehicles, line 5	\$31,203.00		<del>+= 10,100.00</del>
		: Total personal and household items, line 15	\$4,725.00		
		: Total financial assets, line 36	\$12,821.49		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.		: Total farm- and fishing-related property, line 52	\$0.00		
61.		: Total other property not listed, line 54			
62.	Total	personal property. Add lines 56 through 61	\$49,049.49	Copy personal property total	\$49,049.49
63.	Total	of all property on Schedule A/B. Add line 55 + line 62		_	\$259,829.49

Fill in this inform	mation to identify your	case:		
Debtor 1	Jerry Dawson Fre	eeman		
	First Name	Middle Name	Last Name	
Debtor 2	Savanna Nicole F	reeman		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ALABAMA	
Case number				
(if known)				☐ Check if this is an amended filing

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/22

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

  Brief description of the property and line on Current value of the Amount of the exemption you claim

Schedule A/B that lists this property	portion you own	Alli	ount of the exemption you claim	opecine laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
15632 Twin Creek Drive Buhl, AL 35446 Tuscaloosa County	\$210,780.00		\$25,035.49	Ala. Code §§ 6-10-2, 6-10-3, 6-10-4, 6-10-12; Const. Art. X
The tax appriased value is \$ 234,200.00. The tax appriased value minus the 10% administrative deduction expense is \$ Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	§ 205
2019 Chevrolet Tahoe 44,000 + miles Line from Schedule A/B: 3.1	\$31,203.00		\$2,020.66	Ala. Code §§ 6-10-6, 6-10-12
Line Irom Scriedule Arb. 3.1			100% of fair market value, up to any applicable statutory limit	
MISC HOUSEHOLD GOODS & FURNISHINGS	\$2,500.00		\$2,500.00	Ala. Code § 6-10-6
Line from Schedule A/B: <b>6.1</b>			100% of fair market value, up to any applicable statutory limit	
TV & MISC ELECTRONICS Line from Schedule A/B: 7.1	\$800.00		\$800.00	Ala. Code § 6-10-6
Line from Soffedule A/D. 1.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

Debtor 1 Jerry Dawson Freeman
Debtor 2 Savanna Nicole Freeman

Savanna Nicole Freeman			Case number (if known)	-
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		• •	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
BOOKS AND FAMILY PICTURES Line from Schedule A/B: 8.1	\$275.00		\$275.00	Ala. Code § 6-10-6
			100% of fair market value, up to any applicable statutory limit	
EVERYDAY WEARING APPAREL Line from Schedule A/B: 11.1	\$850.00		\$850.00	Ala. Code § 6-10-6
Ellio II oli II osii osii osii osii oli oli oli oli oli oli oli oli oli o			100% of fair market value, up to any applicable statutory limit	
MISC FASHION JEWELRY Line from Schedule A/B: 12.1	\$275.00		\$275.00	Ala. Code § 6-10-6
			100% of fair market value, up to any applicable statutory limit	
1 cat Line from Schedule A/B: 13.1	\$25.00		\$25.00	Ala. Code §§ 6-10-6, 6-10-12
			100% of fair market value, up to any applicable statutory limit	
CASH ON HAND Line from Schedule A/B: 16.1	\$25.00		\$25.00	Ala. Code § 6-10-6
Enternelli dell'occidente 172.			100% of fair market value, up to any applicable statutory limit	
Checking Account: Sutton Bank Line from Schedule A/B: 17.1	\$300.00		\$300.00	Ala. Code § 6-10-6
			100% of fair market value, up to any applicable statutory limit	
CHECKING ACCOUNT BALANCE:	\$40.00		\$40.00	Ala. Code § 6-10-6
Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
Savings: Alabama Credit Union	\$3.00		\$3.00	Ala. Code §§ 6-10-6, 6-10-12
Ellio II oli II osii osii osii osii oli oli oli oli oli oli oli oli oli o			100% of fair market value, up to any applicable statutory limit	
Checking: Cashapp	\$21.70		\$21.70	Ala. Code §§ 6-10-6, 6-10-12
Ellio II oli II osii osii osii osii oli oli oli oli oli oli oli oli oli o			100% of fair market value, up to any applicable statutory limit	
Checking: Cashapp	\$10.57		\$10.57	Ala. Code §§ 6-10-6, 6-10-12
Emo nom conocato / v.b. 1110			100% of fair market value, up to any applicable statutory limit	
EMPLOYER FUNDED 401K:	\$12,421.22		\$12,421.22	Ala. Code § 19-3B-508
Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
	Brief description of the property and line on Schedule A/B that lists this property  BOOKS AND FAMILY PICTURES Line from Schedule A/B: 8.1  EVERYDAY WEARING APPAREL Line from Schedule A/B: 11.1  MISC FASHION JEWELRY Line from Schedule A/B: 12.1  1 cat Line from Schedule A/B: 13.1  CASH ON HAND Line from Schedule A/B: 16.1  Checking Account: Sutton Bank Line from Schedule A/B: 17.1  CHECKING ACCOUNT BALANCE: Alabama Credit Union Line from Schedule A/B: 17.2  Savings: Alabama Credit Union Line from Schedule A/B: 17.3  Checking: Cashapp Line from Schedule A/B: 17.4  Checking: Cashapp Line from Schedule A/B: 17.5  EMPLOYER FUNDED 401K: Retirement Systems of Alabama	Brief description of the property and line on Schedule A/B that lists this property  BOOKS AND FAMILY PICTURES Line from Schedule A/B: 8.1  EVERYDAY WEARING APPAREL Line from Schedule A/B: 11.1  MISC FASHION JEWELRY Line from Schedule A/B: 12.1  1 cat Line from Schedule A/B: 12.1  CASH ON HAND Line from Schedule A/B: 16.1  Checking Account: Sutton Bank Line from Schedule A/B: 17.1  CHECKING ACCOUNT BALANCE: Alabama Credit Union Line from Schedule A/B: 17.2  Savings: Alabama Credit Union Line from Schedule A/B: 17.3  Checking: Cashapp Line from Schedule A/B: 17.4  EMPLOYER FUNDED 401K: Retirement Systems of Alabama  Survings: \$12,421.22	Brief description of the property and line on Schedule A/B that lists this property  BOOKS AND FAMILY PICTURES Line from Schedule A/B: 8.1  EVERYDAY WEARING APPAREL Line from Schedule A/B: 11.1  MISC FASHION JEWELRY Line from Schedule A/B: 12.1  1 cat Line from Schedule A/B: 12.1  CASH ON HAND Line from Schedule A/B: 16.1  Checking Account: Sutton Bank Line from Schedule A/B: 17.1  CHECKING ACCOUNT BALANCE: Alabama Credit Union Line from Schedule A/B: 17.2  Savings: Alabama Credit Union Line from Schedule A/B: 17.3  Checking: Cashapp Line from Schedule A/B: 17.4  Checking: Cashapp Line from Schedule A/B: 17.5  EMPLOYER FUNDED 401K: Retirement Systems of Alabama  S275.00  Current value of the portion you own Copy the value from Schedule A/B: 8.1  Checking Schedule A/B: 11.1  Checking: Cashapp Line from Schedule A/B: 17.5  EMPLOYER FUNDED 401K: Retirement Systems of Alabama	Brief description of the property and line on Schedule A/B that lists this property  Copy the value from Schedule A/B that lists this property  Secondary A/B that lists this property  Check only one box for each exemption. Schedule A/B that lists this property  Secondary A/B that lists

Debt Debt		Jerry Dawson Freeman Savanna Nicole Freeman			Case number (if known)	
		description of the property and line on dule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
		IN EQUIPMENT & TOOLS	\$300.00		\$300.00	Ala. Code §§ 6-10-6, 6-10-12
	_1116 1	Tom Schedule A.D. 33.1			100% of fair market value, up to any applicable statutory limit	
	Subj	<b>rou claiming a homestead exemption</b> ect to adjustment on 4/01/25 and every No			ed on or after the date of adjustmen	nt.)
ı		Yes. Did you acquire the property cover	ed by the exemption wi	thin 1	215 days before you filed this case	?
		□ No				
		□ Yes				

					1/22/25 11:07A
Fill in this infor	mation to identify you	ır case:			
Debtor 1	Jerry Dawson F	reeman			
	First Name	Middle Name Last Name		-	
Debtor 2	Savanna Nicole	Freeman			
(Spouse if, filing)	First Name	Middle Name Last Name		-	
United States Ba	inkruptcy Court for the	NORTHERN DISTRICT OF ALABAMA		-	
Case number					
(if known)				☐ Check	if this is an
				ameno	led filing
Official Forr	<u>n 106D</u>				
Schedule	D: Creditors	Who Have Claims Secured	by Propert	V	12/15
	e Additional Page, fill it	If two married people are filing together, both are equ out, number the entries, and attach it to this form. On			
, ,	have claims secured b	y your property?			
		his form to the court with your other schedules. Yo	u have nothing else	to report on this form	
_		•	a nave nothing cise	to report on this form.	
Yes. Fill II	n all of the information	below.			
Part 1: List A	II Secured Claims		0.1.	0.1	0.1.0
		more than one secured claim, list the creditor separately	Column A	Column B	Column C
		s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	·	•	value of collateral.	claim	If any
	er Consumer	Describe the property that secures the claim:	\$29,182.34	\$31,203.00	\$0.00
Creditor's Nam	ie	2019 Chevrolet Tahoe 44,000 +			
ATTN. Da	inkruptcy Dept	miles			
PO Box 5		As of the date you file, the claim is: Check all that			
Dallas, T		apply.			
	t, City, State & Zip Code	Contingent			
Number, Siree	i, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		■ An agreement you made (such as mortgage or secu	ıred		
Debtor 2 only		car loan)			
■ Debtor 1 and D	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this c	laim relates to a	Other (including a right to offset)			

community debt

Date debt was incurred 7/2024

Last 4 digits of account number

Jerry Dawson Freeman		Case number (if known)				
First Name Middle N	ame Last Name					
Savanna Nicole Freema	ın					
First Name Middle N	ame Last Name					
ellpoint Mortgage rvicing	Describe the property that secures the claim:	\$185,744.51	\$210,780.00	\$0.00		
wrez Box 10826 eenville, SC 603-0826	15632 Twin Creek Drive Buhl, AL 35446 Tuscaloosa County The tax appriased value is \$ 234,200.00. The tax appriased value minus the 10% administrative deduction expense is \$ As of the date you file, the claim is: Check all that apply.  ☐ Contingent					
ber, Street, City, State & Zip Code	☐ Unliquidated					
es the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.					
1 only 2 only	<ul> <li>An agreement you made (such as mortgage or car loan)</li> </ul>	secured				
1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)	)				
t one of the debtors and another	☐ Judgment lien from a lawsuit					
if this claim relates to a nunity debt	Other (including a right to offset)					
was incurred	Last 4 digits of account number					
<del>-</del>	. •					
	First Name Middle N Savanna Nicole Freema First Name Middle N Savanna Nicole Freema First Name Middle N Sellpoint Mortgage vicing stor's Name  Wrez Box 10826 Senville, SC 503-0826 Ser, Street, City, State & Zip Code set the debt? Check one. 1 only 2 only 1 and Debtor 2 only t one of the debtors and another if this claim relates to a funity debt  was incurred 11/28/2018  dollar value of your entries in C the last page of your form, add	First Name	First Name	First Name Middle Name Last Name  Savanna Nicole Freeman  First Name Middle Name Last Name  Allpoint Mortgage  vicing Describe the property that secures the claim: \$185,744.51 \$210,780.00  15632 Twin Creek Drive Buhl, AL 35446 Tuscaloosa County The tax appriased value is \$ 234,200.00. The tax appriased value minus the 10% administrative deduction expense is \$ As of the date you file, the claim is: Check all that apply.    Contingent     Disputed     Disputed     Nature of lien. Check all that apply.    An agreement you made (such as mortgage or secured car loan)   Statutory lien (such as tax lien, mechanic's lien)     Judgment lien from a lawsuit     Other (including a right to offset)     was incurred 11/28/2018		

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

							1/22/25 11:07AM
Fil	I in this inforn	nation to identify your case:					
De	btor 1	Jerry Dawson Freeman					
			dle Name Last Name	_			
1	ebtor 2	Savanna Nicole Freeman					
(Sp	ouse if, filing)	First Name Mid	dle Name Last Name				
Un	ited States Ba	nkruptcy Court for the: NORTH	ERN DISTRICT OF ALABAMA				
Ca	se number						
(if k	nown)					Check	if this is an
						amend	ed filing
∩f	ficial Form	106E/E					
-			ve Unsecured Claims				12/15
			ve Unsecured Claims r creditors with PRIORITY claims and Part 2 fo				
nam	ne and case nur	tinuation Page to this page. If you han heer (if known). II of Your PRIORITY Unsecured	ave no information to report in a Part, do not f	ile that Part. On the to	op of any ac	lditional	pages, write your
		ors have priority unsecured claims a					
٠.	□ No. Go to P	• •	gamst you:				
	Yes.	urt 2.					
2.	List all of your identify what typ possible, list the	pe of claim it is. If a claim has both prio	or has more than one priority unsecured claim, listing and nonpriority amounts, list that claim here a to the creditor's name. If you have more than twom, list the other creditors in Part 3.	nd show both priority a	nd nonpriori	ty amount	ts. As much as
	(For an explana	ation of each type of claim, see the inst	ructions for this form in the instruction booklet.)	Total claim	Priority amount		Nonpriority amount
2.1	Internal	Revenue Service	Last 4 digits of account number	\$0.00	amount	\$0.00	\$0.00
	Priority Cre	editor's Name				•	
	PO Box		When was the debt incurred?				
		Iphia, PA 19101-7346 treet City State Zip Code	As of the date you file, the claim is: Check a	all that apply			
		d the debt? Check one.	☐ Contingent	,			
	Debtor 1 o	only	☐ Unliquidated				
	Debtor 2 o	only	□ Disputed				
	Debtor 1 a	and Debtor 2 only	Type of PRIORITY unsecured claim:				
	_	ne of the debtors and another	☐ Domestic support obligations				
		his claim is for a community debt	■ Taxes and certain other debts you owe the	government			
		subject to offset?	☐ Claims for death or personal injury while yo	· ·			
	■ No	•	☐ Other. Specify				
	Yes		**FOR NOTIFICATION	ON PURPOSES O	DNLY**		

					1722/20 11.07711
	ebtor 1 Jerry Dawson Freeman ebtor 2 Savanna Nicole Freeman	Case number (	(if known)		
2.2	State of Alabama Dept of Revenue	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
	Priority Creditor's Name  Legal Division PO Box 320001	When was the debt incurred?		<u></u>	<u> </u>
	Montgomery, AL 36132-0001  Number Street City State Zip Code	As of the date you file, the claim is: Check all that ap	unly.		
	Who incurred the debt? Check one.	Contingent	Piy		
	■ Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	_	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
	☐ At least one of the debtors and another	_			
	☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the governm			
	Is the claim subject to offset?	☐ Claims for death or personal injury while you were in	ntoxicated		
	■ No □ Yes	Other. Specify  **FOR NOTIFICATION PU	RPOSES ONLY	·**	
	165	TOK NOTH TOATION TO	IN COLO CIVET		
2.3	,,,	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
	Priority Creditor's Name 714 Greensboro Ave RM 108	When was the debt incurred?			
	Tuscaloosa, AL 35401  Number Street City State Zip Code	As of the date you file, the claim is: Check all that ap	vla		
	Who incurred the debt? Check one.	☐ Contingent	. ,		
	■ Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations			
	<u>_</u>	<u> </u>			
	☐ Check if this claim is for a community debt	<ul> <li>■ Taxes and certain other debts you owe the governm</li> <li>□ Claims for death or personal injury while you were in</li> </ul>			
	Is the claim subject to offset?  No		itoxicateu		
	□ Yes	Other. Specify  **FOR NOTIFICATION PU	RPOSES ONLY	·**	
	165	TON NOTHIOATION TO	IN COLO CIVET		
_	LI CAN CY NONDRIGHTY				
P	art 2: List All of Your NONPRIORITY Unsecu				
3.	Do any creditors have nonpriority unsecured claim	s against you?			
	☐ No. You have nothing to report in this part. Submit	this form to the court with your other schedules.			
	■ Yes.				
4.	unsecured claim, list the creditor separately for each c	alphabetical order of the creditor who holds each cla aim. For each claim listed, identify what type of claim it is. creditors in Part 3.If you have more than three nonpriority	Do not list claims all	ready included in Part	1. If more
				Total claim	n

Debtor 2	Jerry Dawson Freeman Savanna Nicole Freeman	Case number (if known)	
4.1	Alabama Credit Union	Last 4 digits of account number	\$5,274.00
	Nonpriority Creditor's Name PO Box 862998 Tuesdage Al 35486 0027	When was the debt incurred?	
	Tuscaloosa, AL 35486-0027  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Debt	
	Alabama Power Company Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	c/o Teresa Black, Registered Agent 600 North 18th Street	When was the debt incurred?	
	Birmingham, AL 35203  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	• , ,	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify **NOTIFICATION PURPOSES ONLY**	
	AT&T Services, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	One AT&T Way, Room 3A104 Bedminster, NJ 07921-2694	When was the debt incurred?	
-	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify **NOTIFICATION PURPOSES ONLY**	

Debto Debto	or 1 Jerry Dawson Freeman  Savanna Nicole Freeman	Case number (if known)			
4.4	Caine & Weiner	Last 4 digits of account number	\$150.00		
	Nonpriority Creditor's Name 15025 Oxnard St Ste 100 Van Nuys, CA 91411	When was the debt incurred?	<u> </u>		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify COLLECTION ACCOUNT			
4.5	Capitol One	Last 4 digits of account number	\$576.00		
	Nonpriority Creditor's Name				
	PO Box 30285	When was the debt incurred?			
	Salt Lake City, UT 84130-0285  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	no of the date year may and status of official and appropriate			
	Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
		□ Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Credit Card			
4.6	Citizens Bank	Last 4 digits of account number	\$5,384.00		
	Nonpriority Creditor's Name PO Box 42111	When was the debt incurred?			
	Providence, RI 02940  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	no of the date year may and status of official and appropriate			
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify Collection Account			

Debtor 2	1 Jerry Dawson Freeman 2 Savanna Nicole Freeman	Case number (if known)	
4.7	Credit Collection Service	Last 4 digits of account number	\$140.00
	Nonpriority Creditor's Name PO Box 773 Needham Heights, MA 02494	When was the debt incurred?	· ·
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection Account	
4.8	Credit Corp Solutions	Last 4 digits of account number	\$737.00
1	Nonpriority Creditor's Name		φ/3/.00
	2012 Berryhill Rd	When was the debt incurred?	
	Montgomery, AL 36117	- Accepted to the control of the state of th	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	_	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	•	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection Account	
	Credit First / Firestone	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name PO Box 81083	When was the debt incurred?	
	Cleveland, OH 44181	Their was the dest mounted?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Debt	

Debto Debto	r 1 Jerry Dawson Freeman r 2 Savanna Nicole Freeman	Case number (if known)			
4.1 0	Department of Ed/Aidvantage	Last 4 digits of account number	\$36,084.00		
	Nonpriority Creditor's Name Po Box 9635 William Box 9 A 19773	When was the debt incurred?			
	Wilkes Barre, PA 18773  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify			
		Student Loan			
4.1			•		
1	First Credit Corporation	Last 4 digits of account number	\$2,220.00		
	Nonpriority Creditor's Name PO Box 9300 Boulder, CO 80301	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	□ Unliquidated			
	■ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Debt			
4.1	First Franklin	Last 4 digits of account number	\$1,082.26		
	Nonpriority Creditor's Name 1911 Skyland Blvd	When was the debt incurred?			
	Tuscaloosa, AL 35405  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify Lawsuit			

Debto Debto	r 1 Jerry Dawson Freeman r 2 Savanna Nicole Freeman	Case number (if known)	
4.1	Jefferson Capital System	Last 4 digits of account number	\$1.00
	Nonpriority Creditor's Name Attn: Rhonda Pratt PO Box 7999 Soint Cloud MN 56202	When was the debt incurred?	
	Saint Cloud, MN 56302  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	■ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Debt Buyer	
4.1	LVNV Funding	Last 4 digits of account number	\$1.00
	Nonpriority Creditor's Name PO Box 10587	When was the debt incurred?	
	Greenville, SC 29603  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.  ☐ Debtor 1 only	☐ Contingent	
		☐ Unliquidated	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	■ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify Debt Buyer	
4.1 5	Portfolio Recover Associates	Last 4 digits of account number	\$1.00
	Nonpriority Creditor's Name PO Box 12914 Norfolk, VA 23541	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	■ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Debt Buyer	

Debto Debto	or 1 Jerry Dawson Freeman or 2 Savanna Nicole Freeman	Case number (if known)			
4.1 6	Portfolio Recover Associates	Last 4 digits of account number	\$1.00		
0	Nonpriority Creditor's Name PO Box 12914	When was the debt incurred?	<u>.</u>		
	Norfolk, VA 23541  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.  Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Debt Buyer			
4.1	Portfolio Recover Associates	Last 4 digits of account number	\$1.00		
7	Nonpriority Creditor's Name	<del></del>	<b>4</b>		
	PO Box 12914	When was the debt incurred?			
	Norfolk, VA 23541  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	, and the feet may and statement and appropriate the feet and the feet			
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	□Yes	Other. Specify Debt Buyer			
4.1	Resurgent / LVNV Funding	Last 4 digits of account number	\$1.00		
0	Nonpriority Creditor's Name	<del></del>	<u> </u>		
	PO Box 1269	When was the debt incurred?			
	Greenville, SC 29602  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oncot an that apply			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts			
	■ No				
	Yes	Other. Specify Debt Buyer			

Debtor 1 Jerry Dawson Freeman Debtor 2 Savanna Nicole Freeman Case number (if known) 4.1 **Sheffield Financial** \$13,394.00 Last 4 digits of account number 9 Nonpriority Creditor's Name When was the debt incurred? PO Box 1704 Clemmons, NC 27012-1704 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Debt Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Alabama Credit Union** Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 220 Bryant Drive Part 2: Creditors with Nonpriority Unsecured Claims Tuscaloosa, AL 35401 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Amazon Store Card** Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 81226 ■ Part 2: Creditors with Nonpriority Unsecured Claims Seattle, WA 98108 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Capitol One Bank** Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 15000 Capitol One Dr Part 2: Creditors with Nonpriority Unsecured Claims Richmond, VA 23238 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capitol One Bank Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 15000 Capitol One Dr Part 2: Creditors with Nonpriority Unsecured Claims Richmond, VA 23238 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Citibank Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 6497 Part 2: Creditors with Nonpriority Unsecured Claims Sioux Falls, SD 57117-6497 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Comenity - Victoria's Secret** Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 659728 Part 2: Creditors with Nonpriority Unsecured Claims San Antonio, TX 78265 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

Official Form 106 E/F

**Geico Insurance** 

One Geico Blvd

Fredericksburg, VA 22412

Schedule E/F: Creditors Who Have Unsecured Claims

Line 4.7 of (Check one):

Last 4 digits of account number

Page 9 of 10

☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 Jerry Dawson Freeman Debtor 2 Savanna Nicole Freeman		Case number (if known)		
Name and Address	On which entry in Part 1 or Part 2 did	Part 2 did you list the original creditor?		
Progressive Casualty	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 94523 Cleveland, OH 44101-4523		Part 2: Creditors with Nonpriority Unsecured Claims		
510 Vellalia, 511 44101 4525	Last 4 digits of account number			
Name and Address On which entry in Part 1 or Part 2 or		you list the original creditor?		
Syncb / Wal-Mart	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
ATTN: Bankruptcy Dept PO Box 965060		Part 2: Creditors with Nonpriority Unsecured Claims		
Orlando, FL 32896-5060				
	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
Synchrony Bank	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 965036 Orlando, FL 32896-5036		Part 2: Creditors with Nonpriority Unsecured Claims		
Onando, i E 32030-3030	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?		
US Attorney	Line <b>2.1</b> of ( <i>Check one</i> ):	■ Part 1: Creditors with Priority Unsecured Claims		
1801 4th Ave N Birmingham, AL 35203		☐ Part 2: Creditors with Nonpriority Unsecured Claims		
Diffining family AL 00200	Last 4 digits of account number			

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	-			Ψ ——	0.00
					Total Claim
	6f.	Student loans	6f.	\$	36,084.00
Total					<u> </u>
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that			
	og.	you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	\$	28,963.26
		here.		Ψ	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	65,047.26
	٥,٠		-1-		03,047.20

Fill in this inform	Fill in this information to identify your case:				
Debtor 1	Jerry Dawson Fre	eman			
	First Name	Middle Name	Last Name		
Debtor 2	Savanna Nicole F	reeman			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ALABAMA		
Case number					
(if known)					Check if this is an
					amended filing

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	Company with Name, Number	wnom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.3	Ony		Oldio	211 0000	
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.5	2.1.)			2 0000	
	Name				<del>_</del>
	Number	Street			<u> </u>
	City		State	ZIP Code	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

			1/22/25 11:07AN
Fill in this i	nformation to identify your case:		
Debtor 1	Jerry Dawson Freeman		
Dahtar O	First Name Middle Nam	ne Last Name	
Debtor 2 (Spouse if, filing	Savanna Nicole Freeman First Name Middle Nam	ne Last Name	
		DISTRICT OF ALABAMA	
Case number	er		
(if known)			☐ Check if this is an
			amended filing
Official	Form 106H		
Scheal	ule H: Your Codebtors		12/15
	and case number (if known). Answer every ou have any codebtors? (If you are filing a jo	pint case, do not list either spouse as a codebtor.	
■ No			
□ Yes			
0.14541			
		munity property state or territory? (Community prop Mexico, Puerto Rico, Texas, Washington, and Wiscons	
	,,,,	<b>3</b> ,	,
_	Go to line 3.		
☐ Yes.	Did your spouse, former spouse, or legal equ	ivalent live with you at the time?	
in line 2	2 again as a codebtor only if that person is 06D), Schedule E/F (Official Form 106E/F),	lude your spouse as a codebtor if your spouse is f a guarantor or cosigner. Make sure you have liste or Schedule G (Official Form 106G). Use Schedule	d the creditor on Schedule D (Official
	olumn 1: Your codebtor me, Number, Street, City, State and ZIP Code		creditor to whom you owe the debt dules that apply:
3.1		☐ Schedule D.	line
	ame	☐ Schedule E/	·
		☐ Schedule G	
	umber Street		
C		ZIP Code	
3.2		☐ Schedule D	, line
	ame	☐ Schedule E/	
		☐ Schedule G	
N	umber Street		
Ci	ty State	ZIP Code	

Page 1 of 1 Official Form 106H Schedule H: Your Codebtors

Fill in this information  Debtor 1	ation to identify your case:  Jerry Dawson Freeman	
Debtor 2 (Spouse, if filing)	Savanna Nicole Freeman	
United States Ba	nkruptcy Court for the: NORTHERN DISTRICT OF ALABAMA	
Case number (If known)		Check if this is:  An amended filing A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	orm 106I	MM / DD/ YYYY
Schedule	e I: Your Income	12/15

spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Describe Employment					
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse		
	If you have more than one job,	<b>F</b>	■ Employed	■ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed		
	employers.	Occupation	Maintenance	Teacher		
	Include part-time, seasonal, or self-employed work.	Employer's name	Sunbelt Rentals Inc	Tuscaloosa County Board of Education		
	Occupation may include student or homemaker, if it applies.	Employer's address	1799 Innovation Point Fort Mill, SC 29715	P.O Box 2568 ATTN: Payroll Tuscaloosa, AL 35403		
		How long employed the	here? 1.5 Years	6 years		

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 4,071.63 6,225.31 2. 2. deductions). If not paid monthly, calculate what the monthly wage would be. 0.00 3. Estimate and list monthly overtime pay. +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 6,225.31 4,071.63

Schedule I: Your Income Official Form 106I page 1 Debtor 1 Jerry Dawson Freeman
Debtor 2 Savanna Nicole Freeman

Case number (if known)

			For	Debtor 1	For Debt	or 2 or g spouse	
	Copy line 4 here	4.	\$	6,225.31	\$	4,071.63	
5.	List all payroll deductions:			<u> </u>			
0.	• •	F-0	¢	4 005 05	¢.	000 00	
	5a. Tax, Medicare, and Social Security deductions	5a.	\$_	1,205.05	\$	626.23	
	5b. Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	250.77	
	5c. Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	0.00	
	5d. Required repayments of retirement fund loans	5d.	\$_	0.00	\$	0.00	
	5e. Insurance	5e.	\$	20.88	\$	407.00	
	5f. Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g. Union dues	5g.	\$	0.00	\$	0.00	
	5h. Other deductions. Specify: AEA	5h.+	- \$ _	0.00	+ \$	48.75	
	Amer/Fd/Di		\$	0.00	\$	83.36	
	Amer/Fd/El		\$_	0.00	\$	66.41	
	VSP		\$	0.00	\$	8.84	
	Critical Illness		\$	8.79	\$	0.00	
	Voluntary Life		\$	7.06	\$	0.00	
	LTD		\$	23.63	\$	0.00	
	STD		\$_	18.59	\$	0.00	
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5q+5h.	 6.	* \$	1,284.00	\$	1,491.36	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	4,941.31	\$	2,580.27	
9.	List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependence of regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8e. Social Security  8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistate that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  8g. Pension or retirement income  8h. Other monthly income. Specify: FUTURE TAX REFUND	8c. 8d. 8e.	\$_ \$_ \$_ \$_	0.00 0.00 0.00 0.00 0.00 0.00 541.75	\$\$ \$\$ \$\$	0.00 0.00 0.00 0.00 0.00 0.00 0.00	
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+81+8g+8h.	9.	Φ	541.75	Φ	0.00	
10.	Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		5,483.06 + \$_	2,580.2	= \$ 8,0	63.33
11.	State all other regular contributions to the expenses that you list in <i>Sched</i> Include contributions from an unmarried partner, members of your household, you other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are respecify:	our depen		. •	ed in <i>Sched</i>	lule J. 1. +\$	0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of Ceapplies					Combined	)63.33
						monthly in	come

Debtor 1 Debtor 2	Jerry Dawson Savanna Nicol		Case number (if known)			
13. <b>Do</b> y	ou expect an inc	ease or decrease within the year after you file this form?				
	Yes. Explain:					

HII	in this informa	ition to identify yo	our case.									
						0.1						
Debtor 1 Jerry Dawson Freeman					Cr		this is: amended filing					
	Debtor 2 Savanna Nicole Freeman (Spouse, if filing)							A supplement showing postpetition chapter 13 expenses as of the following date:				
Unit	ed States Bankı	ruptcy Court for the:	: NORTH	IERN DISTRICT OF ALAE	BAMA		MM	/ DD / YYYY				
	e number nown)											
Oi	fficial Fo	rm 106J										
		J: Your I	Exper	ises					12/15			
Be info	as complete a	and accurate as	possible.	. If two married people and the control of the cont					r supplying correct			
Par		ribe Your House	hold									
1.	Is this a joir											
	□ No. Go to		in a canar	ata haysahald?								
	_	es Debtor 2 live i	n a separ	ate nousenoid?								
	■ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	hold of D	ebtor 2	2.				
2.	Do you have	e dependents?	□ No									
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor			Dependent's age	Does dependent live with you?			
	Do not state	the							□ No			
	dependents	names.			Son			1	■ Yes			
					0			•	□ No			
					Son			2	■ Yes			
					Daughter			7	□ No ■ Yes			
					Dauginei				■ res □ No			
									□ Yes			
3.	expenses o	penses include f people other the d your depende	han $_{oldsymbol{\square}}$	No Yes								
exp	imate your ex		our bankrı	ly Expenses uptcy filing date unless y y is filed. If this is a supp								
the		h assistance and		government assistance i cluded it on <i>Schedule I:</i> Y				Your expe	enses			
4.		or home owners		ses for your residence. I	nclude first mortgage		\$		1,800.00			
	If not includ	led in line 4:										
	4a. Real e	estate taxes				4a.	\$		0.00			
		rty, homeowner's	s, or renter	's insurance		4b.	. —		0.00			
				ıpkeep expenses		4c.	. —		100.00			
5.		owner's associat		dominium dues our residence, such as ho	ome equity loans	4d. 5.	\$ \$		0.00 0.00			
٠.	. wantional i	gago payiii	y c	<del></del>	oquity iourio	٥.	Ψ		0.00			

ebtor 1		wson Freeman			
ebtor 2	Savanna	Nicole Freeman	Case num	ber (if known)	
Utilit	4100.				
Utilit 6a.		, heat, natural gas	6a.	\$	375.00
6b.		wer, garbage collection	6b.	\$	125.00
6c.		e, cell phone, Internet, satellite, and cable services	6c.	\$	210.00
6d.	Other. Sp		6d.	·	0.00
		ekeeping supplies	7.	· ·	1,585.00
		children's education costs	8.	\$	0.00
_		ry, and dry cleaning	9.	\$	400.00
		products and services	10.	\$	97.00
	-	ntal expenses	10.	\$	
		Include gas, maintenance, bus or train fare.	11.	Ψ	415.00
		ar payments.	12.	\$	285.00
		clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
		ributions and religious donations	14.	· -	0.00
	rance.	indutions and rongious denations		·	0.00
		nsurance deducted from your pay or included in lines 4 or 20.			
	Life insura		15a.	\$	0.00
15b.	Health ins	urance	15b.	\$	0.00
15c.	Vehicle in	surance	15c.	\$	165.00
15d.	Other insu	rance. Specify:	15d.	\$	0.00
		nclude taxes deducted from your pay or included in lines 4 or 20.		·	0.00
Spec		ionado tarios acadenda nom your pay or monadou in imico i er zor	16.	\$	0.00
Insta	allment or l	ease payments:			
		ents for Vehicle 1	17a.	\$	0.00
17b.	Car paym	ents for Vehicle 2	17b.	\$	0.00
	Other. Sp		17c.	\$	0.00
	Other. Sp		17d.	\$	0.00
		of alimony, maintenance, and support that you did not report a	s		
		your pay on line 5, Schedule I, Your Income (Official Form 106I)		\$	0.00
Othe	er payments	s you make to support others who do not live with you.		\$	0.00
Spec	,		19.		
		erty expenses not included in lines 4 or 5 of this form or on Scl			
20a.	Mortgages	s on other property	20a.	·	0.00
20b.	Real estat	te taxes	20b.		0.00
		homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenar	nce, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
Othe	er: Specify:	Annual Vehicle Registration	21.	+\$	20.00
		reperation		+\$	19.00
	Expense			+\$	75.00
	-				
	-	monthly expenses			
		through 21.		\$	5,671.00
22b.	Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22	a and 22b. The result is your monthly expenses.		\$	5,671.00
Cala	vuloto ver	monthly not income			
	-	monthly net income.	23a.	¢	0.000.00
		12 (your combined monthly income) from Schedule I.		·	8,063.33
23b.	Copy you	r monthly expenses from line 22c above.	23b.	-\$	5,671.00
220	Cubtroot:	your monthly avanages from your monthly income			
∠3C.		our monthly expenses from your monthly income.  is your <i>monthly net income</i> .	23c.	\$	2,392.33
	THE TESUIT	ns your monuny neumounte.	200.		,
For e	example, do yo	an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect you terms of your mortgage?			or decrease because of a
■ N		tomo o your mongago.			
		Fauld's hour			
$\square$ Y	es.	Explain here:			

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Fill in this inform	nation to identify your o	case:		l					
Debtor 1	Jerry Dawson Fre								
	First Name	Middle Name	Last Name						
Debtor 2 (Spouse if, filing)	Savanna Nicole F	reeman Middle Name	Last Name						
(Spouse II, IIIIng)	riist name	Middle Name	Last Name						
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	Γ OF ALABAMA						
Case number									
(if known)				☐ Check if this is an					
				amended filing					
Official Form <b>Declarat</b>		ın Individual	Debtor's Schedules	12/15					
f two married pe	ople are filing together	, both are equally respo	ensible for supplying correct information.						
obtaining money	You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.								
Sign	n Below								
Did you pay	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Jerry Dawson Freeman
Jerry Dawson Freeman
Signature of Debtor 1

Date January 22, 2025

X /s/ Savanna Nicole Freeman
Savanna Nicole Freeman
Signature of Debtor 2

Date January 22, 2025

Official Form 106Dec

No

Yes. Name of person

**Declaration About an Individual Debtor's Schedules** 

Ħ	l in this inforn	nation to identify your	case:								
	ebtor 1	Jerry Dawson Fr									
		First Name	Middle Name	Last Name							
De	ebtor 2	Savanna Nicole									
(Sp	ouse if, filing)	First Name	Middle Name	Last Name							
Ur	nited States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ALABAMA							
	ase number				-	Check if this is an amended filing					
	fficial Fo	-	Affairs for Indivi	duals Filing for	Bankruptcy	04/22					
info nui	ormation. If m	ore space is needed, n). Answer every ques	attach a separate sheet to tion.	this form. On the top of	are equally responsible for sup any additional pages, write yo						
	<u> </u>		rital Status and Where You	I Lived Before							
1.	What is you	current marital statu	S?								
	<ul><li>■ Married</li><li>□ Not mar</li></ul>	ried									
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?							
	■ No										
	_	List all of the places you lived in the last 3 years. Do not include where you live now.									
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior	Address:	Dates Debtor 2 lived there					
<b>3.</b> sta					nunity property state or territor o Rico, Texas, Washington and V						
	■ No □ Yes. Ma	ıke sure you fill out <i>Sch</i>	edule H: Your Codebtors (O	fficial Form 106H).							
		•	·	,							
Pa	rt 2 Explai	n the Sources of You	r Income								
4.	Fill in the tota	al amount of income you	ployment or from operatir u received from all jobs and a have income that you receiv	all businesses, including p		ndar years?					
	□ No ■ Yes. Fill	in the details.									
			Debtor 1		Debtor 2						
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income	Gross income (before deductions and exclusions)					
	or last calenda anuary 1 to De	r year: cember 31, 2024)	■ Wages, commissions, bonuses, tips	\$76,914.1	1 ■ Wages, commissions, bonuses, tips	\$48,561.05					
			☐ Operating a business		☐ Operating a business						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

			on Freeman			Cas	e number (if known)			
				Debtor 1			Debtor 2			
	For the calendar year before that: (January 1 to December 31, 2023)		Sources of income Check all that apply.  Gross income (before deductions and exclusions)		Sources of inc Check all that a		Gross income (before deductions and exclusions)			
			■ Wages, commissions, bonuses, tips			■ Wages, combonuses, tips	missions,	\$32,575.00		
				☐ Operating a business			Operating a	business		
	r the calen inuary 1 to	dar year: December	31, 2022 )	■ Wages, commissions, bonuses, tips		\$52,920.00	■ Wages, com bonuses, tips	missions,	\$33,575.00	
				☐ Operating a business			☐ Operating a l	business		
	■ No	source and	J	ome from each source separ	ately. Do r	not include income t	hat you listed in lin	e 4.		
				Dahtan 4			Dahtar 2			
				Debtor 1 Sources of income Describe below.	each	s income from source re deductions and sions)	Debtor 2 Sources of inco Describe below.		Gross income (before deductions and exclusions)	
Pa	rt 3: Lis	t Certain Pa	ıvments You	Made Before You Filed for		,				
6.		r Debtor 1's Neither D	or Debtor 2 ebtor 1 nor I	's debts primarily consume Debtor 2 has primarily cons a personal, family, or househo	er debts? sumer del	ots. Consumer debi	s are defined in 11	U.S.C. § 10	1(8) as "incurred by an	
			•	ore you filed for bankruptcy, o	did you pa	y any creditor a tota	l of \$7,575* or mor	e?		
		□ <sub>No.</sub> □ <sub>Yes</sub>	Go to line 7	ne 7.  ow each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you						
			paid that cr not include	reditor. Do not include payme payments to an attorney for to not 4/01/25 and every 3 years.	ents for do this bankr	mestic support obliquetcy case.	gations, such as ch	ild support a	nd alimony. Also, do	
	■ Yes.	Debtor 1	or Debtor 2 o	or both have primarily cons	sumer deb	ots.				
				ore you filed for bankruptcy, o			l of \$600 or more?			
		■ No.	Go to line 7	7.						
		□ Yes	include pay	each creditor to whom you pa rments for domestic support r this bankruptcy case.						
	Creditor	's Name an	d Address	Dates of paym	ent	Total amount	Amount you still owe	Was this p	payment for	

Debtor	Savanna Nicole Freeman		Cas	se number (if known)			
<i>In:</i> of a l	ithin 1 year before you filed for bankrupt siders include your relatives; any general pawhich you are an officer, director, person in business you operate as a sole proprietor. I mony.	artners; relatives of any gen control, or owner of 20%	neral partners; partners or more of their votin	erships of which yog g securities; and a	ou are a general p ny managing age	partner; corporation ent, including one fo	
	No Yes. List all payments to an insider.						
Ir	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	is payment	
in	ithin 1 year before you filed for bankrupt sider? clude payments on debts guaranteed or cos		yments or transfer a	any property on a	ccount of a deb	t that benefited an	
_	No						
∐ Ir	Yes. List all payments to an insider nsider's Name and Address	Dates of payment	Total amount	Amount you	Reason for th		
	Identify Legal Actions, Repossessio		paid	still owe	Include credito	or's name	
C F	Yes. Fill in the details.  Ease title Ease number  First Franklin VS Savanna N	Nature of the case Small Claims	Court or agency Tuscaloosa Co		Status of the case  Pending		
F		Small Claims	Tuscaloosa Co Claims Court ATTN: Libby H	-	■ Pending □ On appeal □ Concluded		
			PO Box 2883 Tuscaloosa, A	L 35403			
Ch	. 140. 60 to line 11.		erty repossessed, t	oreclosed, garnis	shed, attached, s	seized, or levied?	
C	Yes. Fill in the information below.  Creditor Name and Address	Describe the Property		Date		Value of the	
		Explain what happene	ed			property	
	ithin 90 days before you filed for bankru counts or refuse to make a payment bed No		cluding a bank or fi	nancial institutior	ո, set off any am	ounts from your	
	Yes. Fill in the details.						
С	reditor Name and Address	Describe the action th	e creditor took	Date taker	action was า	Amount	
	ithin 1 year before you filed for bankrupt ourt-appointed receiver, a custodian, or a		erty in the possess	ion of an assigne	e for the benefit	t of creditors, a	
	No Yes						

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	btor 1 btor 2	Jerry Dawson Freeman Savanna Nicole Freeman		Case num	nber (if known)	
Pa	rt 5:	List Certain Gifts and Contributions	S			
	Withi			did you give any gifts with a total value of mo	ore than \$600 per person	?
	Gifts	s with a total value of more than \$600 person	0	Describe the gifts	Dates you gave the gifts	Value
		son to Whom You Gave the Gift and ress:				
14.	_	i <b>n 2 years before you filed for bank</b> ru No	ıptcy,	did you give any gifts or contributions with a	total value of more than	\$600 to any charity?
		Yes. Fill in the details for each gift or co	ontribu	ition.		
	more Chai	s or contributions to charities that to e than \$600 rity's Name		Describe what you contributed	Dates you contributed	Value
Pa	rt 6:	ress (Number, Street, City, State and ZIP Code)	)			
15.	or ga	in 1 year before you filed for bankrup imbling? No Yes. Fill in the details.	otcy o	r since you filed for bankruptcy, did you lose	anything because of the	ft, fire, other disaster,
		the loss occurred	Includ	ribe any insurance coverage for the loss le the amount that insurance has paid. List pendiance claims on line 33 of Schedule A/B: Property.		Value of property lost
Pa	rt 7:	List Certain Payments or Transfers				
	Withi	in 1 year before you filed for bankrup ulted about seeking bankruptcy or p	otcy, c	lid you or anyone else acting on your behalf ping a bankruptcy petition? ers, or credit counseling agencies for services req		erty to anyone you
	_	No				
	• `	Yes. Fill in the details.				
	Add Ema	son Who Was Paid ress iil or website address son Who Made the Payment, if Not Yo	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	96 C Clay	terfly Financial Education Dak Creek Drive yton, NC 27520 ps://butterflyfe.com/		CREDIT COUNSELING		\$25.00
17.	prom Do no	nised to help you deal with your cred of include any payment or transfer that	litors	lid you or anyone else acting on your behalf por to make payments to your creditors? sted on line 16.	pay or transfer any prope	erty to anyone who
	_	No				
		Yes. Fill in the details.			_	
	Pers Add	son Who Was Paid ress		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 **Jerry Dawson Freeman**Debtor 2 **Savanna Nicole Freeman** 

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No									
	☐ Yes. Fill in the details.	Yes. Fill in the details.								
	Person Who Received Transfer Address		Description and value of property transferred		Describe any property or payments received or debts paid in exchange		as			
	Person's relationship to you									
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		ny property to a	self-settle	d trust or similar device	e of which you are	а			
	Name of trust	Description and	alue of the pro	perty trans	ferred	Date Transfer v	vas			
		<b>p</b>	,			made				
Pai	t 8: List of Certain Financial Accounts, In	struments, Safe Deposi	t Boxes, and St	orage Unit	s					
20.		cy, were any financial ac	counts or instru	uments he	ld in your name, or for	your benefit, close	ed,			
	sold, moved, or transferred? Include checking, savings, money market, whouses, pension funds, cooperatives, asso No				; shares in banks, cred	lit unions, brokera	ge			
	Yes. Fill in the details.									
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	• • • • • • • • • • • • • • • • • • • •		Date account was closed, sold, moved, or transferred	Last bala before closing trans	g or			
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	r bankruptcy, ar	ny safe dep	osit box or other depo	sitory for securitie	s,			
	■ No □ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had access to it?  Address (Number, Street, City, State and ZIP Code)			Do you still have it?				
22.	Have you stored property in a storage unit	or place other than you	home within 1	year befor	e you filed for bankrup	tcy?				
	■ No □ Yes. Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?				
Pai	t 9: Identify Property You Hold or Control	l for Someone Else								
23.	Do you hold or control any property that so for someone.	omeone else owns? Incl	ude any propert	y you borr	owed from, are storing	for, or hold in trus	st			
	■ No □ Yes. Fill in the details.									
	Owner's Name  Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)			Describe	the property	Va	alue			
Pai	t 10: Give Details About Environmental Inf	ormation								
For	the purpose of Part 10, the following definiti	ions apply:								

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

Debtor 1 **Jerry Dawson Freeman**Debtor 2 **Savanna Nicole Freeman** 

Case number (if known)

	toxic substances, wastes, or material into t regulations controlling the cleanup of these		lwate	er, or other medium, including st	atutes or				
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
	Hazardous material means anything an envi hazardous material, pollutant, contaminant	rironmental law defines as a hazardous	was	ete, hazardous substance, toxic s	substance,				
Rep	ort all notices, releases, and proceedings th	at you know about, regardless of when	ı they	y occurred.					
24.	Has any governmental unit notified you tha	t you may be liable or potentially liable	und	er or in violation of an environme	ental law?				
	■ No								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of	any release of hazardous material?							
	_	•							
26. H	■ No □ Yes. Fill in the details.								
	Name of site Governmental unit Environmental law, if you Date of notice								
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)	i i	know it					
26.	Have you been a party in any judicial or adı	ministrative proceeding under any envi	ronm	nental law? Include settlements a	and orders.				
	■ No								
	Yes. Fill in the details.								
	Case Title	Court or agency	Nat	ure of the case	Status of the				
	Case Number	Name Address (Number, Street, City, State and ZIP Code)			case				
Par	t 11: Give Details About Your Business or	Connections to Any Business							
27.	Within 4 years before you filed for bankrup	tcy, did you own a business or have an	y of	the following connections to any	business?				
	☐ A sole proprietor or self-employed i	n a trade, profession, or other activity,	eithe	er full-time or part-time					
	☐ A member of a limited liability comp	pany (LLC) or limited liability partnershi	ip (Ll	LP)					
	☐ A partner in a partnership								
	☐ An officer, director, or managing ex	ecutive of a corporation							
	☐ An owner of at least 5% of the votin	g or equity securities of a corporation							
	■ No. None of the above applies. Go to	Part 12.							
	Yes. Check all that apply above and fil	I in the details below for each business	<b>.</b>						
	Business Name	Describe the nature of the business		Employer Identification number					
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security number or ITIN.  Dates business existed					
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement t	o an	yone about your business? Inclu	ide all financial				

Part 12: Sign Below

No

Name

Yes. Fill in the details below.

Address (Number, Street, City, State and ZIP Code)

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

**Date Issued** 

Debtor 1 Jerry Dawson Freeman Debtor 2 Savanna Nicole Freeman	Case number (if known)
are true and correct. I understand that making a false with a bankruptcy case can result in fines up to \$250, 18 U.S.C. §§ 152, 1341, 1519, and 3571.	statement, concealing property, or obtaining money or property by fraud in connection 000, or imprisonment for up to 20 years, or both.
/s/ Jerry Dawson Freeman	/s/ Savanna Nicole Freeman
Jerry Dawson Freeman	Savanna Nicole Freeman
Signature of Debtor 1	Signature of Debtor 2
Date January 22, 2025	Date January 22, 2025
Did you attach additional pages to Your Statement of  ■ No □ Yes	Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is not an ar ■ No	ttorney to help you fill out bankruptcy forms?
☐ Yes. Name of Person Attach the Bankruptcy F	Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:							
Debtor 1	Jerry Dawson Freema	n					
Debtor 2 (Spouse, if filing)	Savanna Nicole Freem	an					
United States Bankruptcy Court for the:		orthern District of Alabama					
Case number (if known)							

Check	Check as directed in lines 17 and 21:							
According to the calculations required by this Statement:								
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

## Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income** and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. ☐ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B, lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 4,071.63 6,225.31 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) 0.00 -\$ Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Debtor 1 Jerry D
Debtor 2 Savanr

Jerry Dawson Freeman Savanna Nicole Freeman

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 o non-filing		
7.	Interest, dividends, and royalties			\$	0.00	\$ 	0.00	
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amo the Social Security Act. Instead, list it here:							
	For you		00					
	For your spouse		00					
10.	Pension or retirement income. Do not include any benefit under the Social Security Act. Also, except as not include any compensation, pension, pay, annuity United States Government in connection with a disal disability, or death of a member of the uniformed ser pay paid under chapter 61 of title 10, then include the does not exceed the amount of retired pay to which y if retired under any provision of title 10 other than ch Income from all other sources not listed above.	s stated in the next sente y, or allowance paid by the bility, combat-related inju- vices. If you received any at pay only to the extent the you would otherwise be e apter 61 of that title. Specify the source and an	nce, do e ry or y retired that it entitled mount.	\$	0.00	\$	0.00	
	Do not include any benefits received under the Social received as a victim of a war crime, a crime against I domestic terrorism; or compensation, pension, pay, a United States Government in connection with a disal disability, or death of a member of the uniformed ser sources on a separate page and put the total below.	humanity, or international annuity, or allowance paid bility, combat-related inju vices. If necessary, list of	or d by the ry or					
				\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.	Calculate your total average monthly income. Adeeach column. Then add the total for Column A to the		\$	6,225.31	+ \$ _	4,071.63	= \$ 10,296.94  Total average	
Part	2: Determine How to Measure Your Deduction	ns from Income					monthly income	
12. 13.	Copy your total average monthly income from lin Calculate the marital adjustment. Check one:	ne 11.					\$10,296.94	
	You are not married. Fill in 0 below.							
	■ You are married and your spouse is filing with y	ou. Fill in 0 below.						
	□ You are married and your spouse is not filing w Fill in the amount of the income listed in line 11 dependents, such as payment of the spouse's t Below, specify the basis for excluding this incor adjustments on a separate page. If this adjustment does not apply, enter 0 below	, Column B, that was NO ax liability or the spouse's me and the amount of inc	s suppor	t of someon	e other th	nan you or you	r dependents.	
		•	\$					
			\$		_			
			+\$		_			
	Total		\$	0.0	<u>0</u> c	opy here=>	0.00	)
14.	Your current monthly income. Subtract line 13 fr	rom line 12.					\$10,296.94	
15.	Calculate your current monthly income for the y  15a. Copy line 14 here=>						\$10,296.94	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1 Debtor 2		erry Dawson Freeman avanna Nicole Freeman		Case number (if known)		
		Multiply line 15a by 12 (the number of months in	n a year).		_	<b>x</b> 12
1	5b.	The result is your current monthly income for the	e year for this part	of the form.	\$	123,563.28
16. <b>Ca</b>	lcul	ate the median family income that applies to	you. Follow these	steps:		
16	a. Fi	Il in the state in which you live.	AL	_		
161	b. F	Il in the number of people in your household.	5			
	T in	Il in the median family income for your state and of find a list of applicable median income amount structions for this form. This list may also be ava of the lines compare?	s, go online using	the link specified in the separate	\$	108,755.00
178	a.	Line 15b is less than or equal to line 16c. (		1 of this form, check box 1, Disposable incation of Your Disposable Income (Official Fo		
171		Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14 a	of page 1 of this foul thi	orm, check box 2, <i>Disposable income is del</i> isposable Income (Official Form 122C-2)	termined i	under 11 U.S.C. §
Part 3:		Calculate Your Commitment Period Under 11	- , ,	(4)		
		your total average monthly income from line f t the marital adjustment if it applies. If you are		and is not filing with you and you	\$	10,296.94
cor	nten	d that calculating the commitment period under 's' income, copy the amount from line 13.				
		the marital adjustment does not apply, fill in 0 on	line 19a.		<b>-</b> \$	0.00
191	b. <b>S</b>	ubtract line 19a from line 18.			\$_	10,296.94
		ate your current monthly income for the year		•		40 206 04
20		opy line 19b			\$	10,296.94
	M	lultiply by 12 (the number of months in a year).				x 12
201	b. T	he result is your current monthly income for the y	ear for this part of	the form	\$	123,563.28
200	c. C	opy the median family income for your state and	size of household	from line 16c	\$	108,755.00
21.	. н	ow do the lines compare?				
		Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	se ordered by the	court, on the top of page 1 of this form, che	eck box 3,	The commitment
	•	Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	nless otherwise or	dered by the court, on the top of page 1 of t	his form,	check box 4, The
Part 4:		Sign Below				
Ву	sigr	ning here, under penalty of perjury I declare that	the information on	this statement and in any attachments is tr	ue and co	orrect.
		erry Dawson Freeman		/s/ Savanna Nicole Freeman		
		/ Dawson Freeman tture of Debtor 1		Savanna Nicole Freeman Signature of Debtor 2		
Da		January 22, 2025 MM / DD / YYYY		Date January 22, 2025 MM / DD / YYYY		
If y	ou o	checked 17a, do NOT fill out or file Form 122C-2				

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1	Jerry Dawson Freeman
Debtor 2	Savanna Nicole Freeman

Case number (if known)

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Fill in this info	ormation to identify your case:		
Debtor 1	Jerry Dawson Freeman		
Debtor 2	Savanna Nicole Freeman		
(Spouse, if filir	<u> </u>		
United States	Bankruptcy Court for the: Northern District of Alabama		
Case number (if known)		☐ Check if this is an amended filing	
Official Form 1	22C-2		
Chapter	13 Calculation of Your Disposable Inc	ome	04/2
	form, you will need your completed copy of <i>Chapter 13 Statement operiod</i> (Official Form 122C-1).	of Your Current Monthly Income and Calculation of	

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C–1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

5

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 2,413.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Case number (if known)

Peo	ple w	vho are under 65 years of age								
	7a.	Out-of-pocket health care allowance per person	\$	83						
	7b.	Number of people who are under 65	Χ	5						
	7c.	Subtotal. Multiply line 7a by line 7b.	\$	415.00	Copy her	e=> \$	41	5.00		
Peo	ple w	vho are 65 years of age or older								
	7d.	Out-of-pocket health care allowance per person	\$	158						
	7e.	Number of people who are 65 or older	Χ	0						
	7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00	Copy her	e=> \$		0.00		
	7g.	Total. Add line 7c and line 7f			\$\$15.00		Copy total	l here=>	\$	415.00
		andards You must use the IRS Local Standards to information from the IRS, the U.S. Trustee Pro				ard for	housing	for		
	•	tcy purposes into two parts:	_							
<b>-</b>	lousi	ing and utilities - Insurance and operating expen	nses							
	lousi	ing and utilities - Mortgage or rent expenses								
	nsw	er the guestions in lines 8-9, use the U.S. Truste	e Progra	am chart. To	find the chart, go	online	using the	e iink s	pecilieu ii	i the
To a	arate Hou	er the questions in lines 8-9, use the U.S. Truste instructions for this form. This chart may also be using and utilities - Insurance and operating expete dollar amount listed for your county for insurance	be availa enses: L	ible at the ba Jsing the num	ankruptcy clerk's nber of people you	office.	•	,	pecilieu ii	
To a	Hou in th	instructions for this form. This chart may also be instructions for this form. This chart may also be sing and utilities - Insurance and operating exp	be availa enses: L	ible at the ba Jsing the num	ankruptcy clerk's nber of people you	office.	•	,	pecineu ii	
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To a sepa	Hou in th Hou 9a.	e instructions for this form. This chart may also be using and utilities - Insurance and operating experie dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses.	be availa enses: L and ope fill in the es. and other	ble at the bad Jsing the numerating expensed dollar amount of debts secured that are the bad secured to the bad secured that are the bad secured to the bad secured that are the bad secured to the bad sec	ankruptcy clerk's nber of people you ses.  nt red by your home.	office. entered	in line 5,	fill \$_	pecinieu ii	
To a sep. 8.	Hou in th Hou 9a.	e instructions for this form. This chart may also be using and utilities - Insurance and operating experie dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, illisted for your county for mortgage or rent expenses.  Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 60.	be availaenses: L and ope fill in the es. and other dd all am 0 months	ble at the bad Jsing the numerating expensed dollar amount of debts secured that are the bad secured to the bad secured that are the bad secured to the bad secured that are the bad secured to the bad sec	ankruptcy clerk's nber of people you ses.  nt  red by your home. re	office. entered	in line 5,	fill \$_	pecinieu ii	
To a sep.	Hou in th Hou 9a.	instructions for this form. This chart may also be using and utilities - Insurance and operating experie dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses.  Total average monthly payment for all mortgages at a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.	be availaenses: L and ope fill in the es. and other dd all am 0 months	dollar amour r debts secur nounts that ar s after you file verage mon ayment	ankruptcy clerk's nber of people you ses.  nt  red by your home. re	office. entered	in line 5,	fill \$_	pecinieu ii	871.00
To a sep.	Hou in th Hou 9a.	e instructions for this form. This chart may also be using and utilities - Insurance and operating experie dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, illisted for your county for mortgage or rent expenses.  Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.  Name of the creditor	be availaenses: L and ope fill in the es. and other dd all am 0 months	dollar amour r debts secur nounts that ar s after you file verage mon ayment	ankruptcy clerk's nber of people you ses.  Int  red by your home. re e  Inthiby  D0.00	office. entered	in line 5,	fill \$_		871.00
To a sepa	Hou in th Hou 9a.	e instructions for this form. This chart may also be using and utilities - Insurance and operating experie dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, illisted for your county for mortgage or rent expenses.  Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.  Name of the creditor	be availaenses: L and ope fill in the es. and other dd all am 0 months	dollar amour r debts secur nounts that ar s after you file verage mon ayment 1,80	ankruptcy clerk's nber of people you ses.  nt red by your home. re	office. entered	1,36	\$\$	Repeat th on line 33	<b>871.00</b>
To a sep.	Hou in th Hou 9a.	e instructions for this form. This chart may also be using and utilities - Insurance and operating expluse dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses.  Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.  Name of the creditor  Shellpoint Mortgage Servicing	be availaenses: L and ope fill in the es. and other dd all am 0 months	dollar amour r debts secur nounts that ar s after you file verage mon ayment 1,80	ankruptcy clerk's nber of people you ses.  nt  red by your home. re e  uthly  00.00  Copy	office. entered	1,36	\$\$	Repeat th	<b>871.00</b>
To a sep.	Hou in th Hou 9a.	e instructions for this form. This chart may also be using and utilities - Insurance and operating experie dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses.  Total average monthly payment for all mortgages at the total average monthly payment, accontractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.  Name of the creditor  Shellpoint Mortgage Servicing	be availaenses: L and ope fill in the es. and other dd all am 0 months A p	able at the bad Jsing the numerating expensed dollar amount of debts secure nounts that are safter you file to the secure of the safter you file to the secure of the secure of the safter you file to the secure of the safter you file to the secure of the	ankruptcy clerk's nber of people you ses.  Int  red by your home. re e  athly  00.00  Copy here=>	office. entered	1,36	\$\$	Repeat th on line 33	871.00
To a sep. 8. 9.	Hou 9a. 9b.	einstructions for this form. This chart may also be using and utilities - Insurance and operating experience dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, is listed for your county for mortgage or rent expenses.  Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.  Name of the creditor  Shellpoint Mortgage Servicing  9b. Total average monthly payment.  Net mortgage or rent expense.  Subtract line 9b (total average monthly payment) for	be availaenses: L and ope fill in the es. and other dd all am 0 months    A p	able at the bad Jsing the numerating expensed dollar amount of debts secured the secure of the secur	ankruptcy clerk's nber of people you ses.  Int  red by your home. re e  Ithly  00.00  Copy here=>  andard for housin	office. entered	1,36 1,8	\$_00.00 Copy	Repeat th on line 33	<b>871.00</b>

Case number (if known)

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 260.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for 2019 Chevrolet Tahoe 44.000 + miles 13a. Ownership or leasing costs using IRS Local Standard..... 619.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment Santander Consumer 690.00 Repeat this Copy amount on **Total Average Monthly Payment** 690.00 690.00 line 33b. 13c. Net Vehicle 1 ownership or lease expense Copy net Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. ..... expense here 0.00 0.00 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment Copy Repeat this here amount on line Total average monthly payment 0.00 33c. 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. ..... expense here 0.00 0.00

Official Form 122C-2

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may

Public Transportation expense allowance regardless of whether you use public transportation.

not claim more than the IRS Local Standard for Public Transportation.

0.00

0.00

Debtor 1 Debtor 2 Jerry Dawson Freeman Savanna Nicole Freeman

Case number	(if known)
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Oth						
		addition to the expense of following IRS categories		, you are allowed your monthly expenses	for	
16.	self-employment taxes, social s	ecurity taxes, and Medic ver, if you expect to rece the total monthly amoun	care taxes. You may inc eive a tax refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from the divide the expected refund by 12 for taxes.	\$	1,831.28
17.	Involuntary deductions: The t		luctions that your job re	quires, such as retirement		
	contributions, union dues, and u		h cuch ac voluntary 40	1(k) contributions or payroll savings.	\$	258.67
10		, ,, ,		e insurance. If two married people are	· —	
10.	filing together, include payment	s that you make for your e insurance on your depe	r spouse's term life insu		\$	7.06
19.	Court-ordered payments: The			by the order of a court or		
	administrative agency, such as			Manager Part the annual Proof and in Part OF	\$	0.00
	. ,			You will list these obligations in line 35.	Ψ_	0.00
20.	Education: The total monthly a		education that is either	required:		
	as a condition for your job, o				•	0.00
	for your physically or mental	ly challenged dependen	t child if no public educ	ation is available for similar services.	\$_	0.00
21.	<b>Childcare:</b> The total monthly an Do not include payments for an	• • •	•	sitting, daycare, nursery, and preschool.	\$	0.00
22.		nd welfare of you or your clude only the amount the	r dependents and that is nat is more than the tota		\$	0.00
00	•	•			* —	
20.	for you and your dependents, s phone service, to the extent nec income, if it is not reimbursed b	uch as pagers, call waiti cessary for your health a y your employer. sic home telephone, inte	ing, caller identification, and welfare or that of your ernet and cell phone se	you pay for telecommunication services special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment ount you previously deducted.	+\$	95.00
		rad rindar tha IDC avea				
24.	Add lines 6 through 22	rea under the IKS expe	ense allowances.		\$	6,151.01
	Add lines 6 through 23.			ne Means Test	\$	6,151.01
		These are additional d	deductions allowed by thany expense allowances		\$	6,151.01
Add	Add lines 6 through 23.  litional Expense Deductions  Health insurance, disability ir	These are additional d Note: Do not include a	deductions allowed by the any expense allowances avings account expense			6,151.01
Add	Add lines 6 through 23.  litional Expense Deductions  Health insurance, disability ir insurance, disability insurance,	These are additional d Note: Do not include a	deductions allowed by the any expense allowances avings account expense	s listed in lines 6-24.  ses. The monthly expenses for health		6,151.01
Add	Add lines 6 through 23.  Iitional Expense Deductions  Health insurance, disability ir insurance, disability insurance, your dependents.	These are additional d Note: Do not include a	deductions allowed by the any expense allowances avings account expenounts that are reasonab	s listed in lines 6-24.  ses. The monthly expenses for health		6,151.01
Add	Add lines 6 through 23.  litional Expense Deductions  Health insurance, disability ir insurance, disability insurance, your dependents.  Health insurance	These are additional d Note: Do not include a nsurance, and health sand health savings acco	deductions allowed by the any expense allowances avings account expension that are reasonab 427.88	s listed in lines 6-24.  ses. The monthly expenses for health		6,151.01
Add	Add lines 6 through 23.  Iitional Expense Deductions  Health insurance, disability ir insurance, disability insurance, your dependents.  Health insurance  Disability insurance	These are additional d Note: Do not include a nsurance, and health sand health savings acco	deductions allowed by the any expense allowances avings account expense ounts that are reasonab  \$ 427.88  \$ 0.00	s listed in lines 6-24.  ses. The monthly expenses for health		6,151.01 427.88
Add	Add lines 6 through 23.  Iitional Expense Deductions  Health insurance, disability ir insurance, disability insurance, your dependents.  Health insurance  Disability insurance  Health savings account  Total	These are additional di Note: Do not include a nsurance, and health sand health savings acco	deductions allowed by the any expense allowances avings account expension to that are reasonab  \$ 427.88 \$ 0.00  + \$ 0.00	s listed in lines 6-24.  ISSES. The monthly expenses for health ly necessary for yourself, your spouse, o	r	
Add	Add lines 6 through 23.  Iitional Expense Deductions  Health insurance, disability ir insurance, disability insurance, your dependents.  Health insurance  Disability insurance  Health savings account	These are additional di Note: Do not include a nsurance, and health sand health savings acco	deductions allowed by the any expense allowances avings account expension to that are reasonab  \$ 427.88 \$ 0.00  + \$ 0.00	s listed in lines 6-24.  ISSES. The monthly expenses for health ly necessary for yourself, your spouse, o	r	
Add	Add lines 6 through 23.  Ititional Expense Deductions  Health insurance, disability in insurance, disability insurance, your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this total	These are additional di Note: Do not include a nsurance, and health sand health savings acco	deductions allowed by the any expense allowances avings account expension to that are reasonab  \$ 427.88 \$ 0.00  + \$ 0.00	s listed in lines 6-24.  ISSES. The monthly expenses for health ly necessary for yourself, your spouse, o	r	
<b>Add</b> 25.	Add lines 6 through 23.  Iitional Expense Deductions  Health insurance, disability ir insurance, disability insurance, your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this total  No. How much do you a yes  Yes  Continuing contributions to t continue to pay for the reasonal your household or member of y	These are additional di Note: Do not include a nsurance, and health sa and health savings according amount? actually spend? he care of household of ble and necessary care four immediate family wh	deductions allowed by the any expense allowances avings account expense allowances avings account expension that are reasonables \$ 427.88 \$ 0.00 \$ 427.88 \$ 0.00 \$ 427.88	copy total here=>  Copy total here=>  e actual monthly expenses that you will rely, chronically ill, or disabled member of such expenses. These expenses may	r	
25. 26.	Add lines 6 through 23.  Ilitional Expense Deductions  Health insurance, disability in insurance, disability insurance, your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this total  No. How much do you are yes  Continuing contributions to to continue to pay for the reasonal your household or member of y include contributions to an account.	These are additional of Note: Do not include a nsurance, and health sand health savings according to the care of household of the care of household of the care of unimmediate family whount of a qualified ABLE	deductions allowed by the any expense allowances avings account expense allowances avings account expensions that are reasonables \$ 427.88 \$ 0.00 \$ 427.88 \$ 427.88 \$ 0.00 \$ 427.88 \$ 4	copy total here=>  Copy total here=>  actual monthly expenses that you will rely, chronically ill, or disabled member of such expenses. These expenses may 129A(b)	r \$	427.88
25. 26.	Add lines 6 through 23.  Ilitional Expense Deductions  Health insurance, disability in insurance, disability insurance, your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this total  No. How much do you a Yes  Continuing contributions to t continue to pay for the reasonal your household or member of y include contributions to an according to the reasonal your household or member of y include contributions to an according the reasonal your household or member of y include contributions to an according to the reasonal your household or member of y include contributions to an according to the reasonal your household or member of y include contributions to an according to the reasonal your household or member of y include contributions to an according to the reasonal your household or member of y include contributions to an according to the reasonal your household or member of y include contributions to an according to the reasonal your household or member of y include contributions to an according to the reasonal your household or member of y include contributions to an according to the reasonal your household or member of y include contributions to an according to the reasonal your household or member of y include contributions to an according to the reasonal your household or member of y include your household your household or member of y include your household	These are additional di Note: Do not include a nsurance, and health sa and health savings accor- amount? actually spend? he care of household of ble and necessary care our immediate family whount of a qualified ABLE lence. The reasonably n	deductions allowed by the any expense allowances avings account expense allowances avings account expension that are reasonables 427.88  \$ 0.00  \$ 427.88  \$ 0.00  \$ 427.88   S or family members. The and support of an elder no is unable to pay for supporgram. 26 U.S.C. § 5 decessary monthly expense.	copy total here=>  Copy total here=>  e actual monthly expenses that you will rely, chronically ill, or disabled member of such expenses. These expenses may	r \$	427.88

Official Form 122C-2

Debtor 1 Debtor 2	Jerry Dawson Freeman Savanna Nicole Freeman	Cas	se number ( <i>if known</i> )			
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance	e and operating expens	ses on		
	If you believe that you have home energy of 8, then fill in the excess amount of home en	osts that are more than the home energy cosergy costs	ets included in expense	s on line		
	You must give your case trustee documents amount claimed is reasonable and necessa	tion of your actual expenses, and you must sry.	show that the additiona	I	\$	0.00
	Education expenses for dependent child \$189.58* per child) that you pay for your de public elementary or secondary school.	ren who are younger than 18. The monthly bendent children who are younger than 18 ye	expenses (not more the ears old to attend a prive	an ate or		
	You must give your case trustee documenta claimed is reasonable and necessary and n	ation of your actual expenses, and you must out already accounted for in lines 6-23.	explain why the amoun	t		
	* Subject to adjustment on 4/01/25, and eve	ry 3 years after that for cases begun on or af	fter the date of adjustm	ent.	\$	0.00
	30. <b>Additional food and clothing expense.</b> The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.					
		onal allowance, go online using the link spec o be available at the bankruptcy clerk's office				
	You must show that the additional amount of	laimed is reasonable and necessary.			\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable orga	amount that you will continue to contribute in nization. 11 U.S.C. § 548(d)(3) and (4).	n the form of cash or fir	ancial		
	Do not include any amount more than 15%	of your gross monthly income.			\$	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.			\$	427.88
Dod	uctions for Debt Payment					
le	pans, and other secured debt, fill in lines	n property that you own, including home 33a through 33e. ent, add all amounts that are contractually du				
	reditor in the 60 months after you file for bar		ie to each seculed		Averes	e monthly
	Mortgages on your home				paymer	•
33a.	Copy line 9b here			=>	\$	1,800.00
	Loans on your first two vehicles					
33b.	Copy line 13b here			=>	\$	690.00
33c.	Copy line 13e here			=>	\$	0.00
33d.	List other secured debts:					
Nam	e of each creditor for other secured debt	Identify property that secures the debt	Does payr include tax or insuran	ces		
			□ No			
	-NONE-		☐ Yes		\$	
					<b>—</b>	
			□ No			
			□ Yes		\$	
			□ No			
			☐ Yes	+	\$	
				7		
33e	Total average monthly payment. Add lines	33a through 33d	\$\$	Copy total here=>	\$	2,490.00

Debtor 1 Jerry Dawson Freeman
Debtor 2 Savanna Nicole Freeman

Case number (if known)

	debts that you listed in ling property necessary for you				,				
□ No.	Go to line 35.								
■ Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill i	ssession of your property							
Name of the	e creditor	Identify property that sec	cures the deb	t	Total cure an	nount		onthly c	ure
Shellpoir	nt Mortgage Servicing	15632 Twin Creek E 35446 Tuscaloosa The tax appriased v 234,200.00. The tax minus the 10% adm deduction expense	County /alue is \$ appriased inistrative	value	19,6	<b>73.10</b> ÷	60 = \$		327.89
				\$			60 = \$ $60 = +$$		
					-	<del>-</del>	_ ` -		
				Total	\$	327.89	Copy total here=>	\$	327.89
■ No. □ Yes.	Go to line 36.  Fill in the total amount of a ongoing priority claims, su  Total amount of all past-c	ch as those you listed in lir		e current or	\$	0.00	÷ 60	\$	0.00
36. Projecte	ed monthly Chapter 13 plan				· <del></del>	672.00	- 00	Ψ	0.00
Current Office of the Exec To find a	multiplier for your district as the United States Courts (focutive Office for United State list of district multipliers that inclinstructions for this form. This lis	stated on the list issued by or districts in Alabama and s Trustees (for all other dis udes your district, go online us	North Caroli stricts). sing the link sp	na) or by		96			
•	monthly administrative expe		.,.,		\$13		Copy total here=> \$		133.09
37. Add al	l of the deductions for deb	t payment. Add lines 33e	through 36.					\$	2,950.98
Total Deduc	ctions from Income								
38. <b>Add all</b>	of the allowed deductions.								
	ne 24, All of the expenses a se allowances	llowed under IRS	\$	6,151.01	_				
			Φ.						
Copy li	ne 32, All of the additional e	xpense deductions	\$	427.88	<u></u>				
	ne 32, All of the additional e. ne 37, All of the deductions		+\$	427.88 2,950.98	_				

Debtor 1
Debtor 2

Determine Your Disposable

39. Copy your total current monthly i
Statement of Your Current Month

40. Fill in any reasonably necessary i
children. The monthly average of a
disability payments for a dependent
received in accordance with applica
necessary to be expended for such

41. Fill in all qualified retirement dedle
employer withheld from wages as co
in 11 U.S.C. § 541(b)(7) plus all requirements of the specified in 11 U.S.C. § 362(b)(19).

42. Total of all deductions allowed un

43. Deduction for special circumstan
expenses and you have no reasonal

|--|

#### Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)

39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13
Statement of Your Current Monthly Income and Calculation of Commitment Period.

\$ 10,296.94

40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.

0.00

41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).

\$ 250.77

42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here \_\_\_\_=

\$ 9,529.87

43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.

Describe the special circumstances	Amount of expense
Attorney Fees	\$ 75.00
	\$
	\$
	Сору

=> \$ 9,855.64 Copy here=> -\$ 9,855.64

45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39.

441.30

75.00

#### Part 3: Change in Income or Expenses

44. Total adjustments. Add lines 40 through 43.

46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.

Form	Line	Reason for change	Date of change	Increase or decrease?	Amount of change
☐ 122C-1				☐ Increase	
☐ 122C-2				□ Decrease	\$
☐ 122C-1				☐ Increase	
☐ 122C-2				□ Decrease	\$
☐ 122C-1				☐ Increase	
☐ 122C-2				□ Decrease	\$
☐ 122C-1				☐ Increase	
☐ 122C-2				☐ Decrease	\$

Total | \$

Debtor 2	Savanna Nicole Freeman	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you declare that the infor	mation on this statement and in any attachments is true and correct.
X	/s/ Jerry Dawson Freeman Jerry Dawson Freeman Signature of Debtor 1	X /s/ Savanna Nicole Freeman Savanna Nicole Freeman Signature of Debtor 2
Date	January 22, 2025 MM / DD / YYYY	Date January 22, 2025 MM / DD / YYYY

**Jerry Dawson Freeman** 

Debtor 1 Jerry Dawson Freeman
Debtor 2 Savanna Nicole Freeman

Case	number	(if known)
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## **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 07/01/2024 to 12/31/2024.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Sunbelt Rentals

Income	hv	Month:

6 Months Ago:	07/2024	\$5,912.50
5 Months Ago:	08/2024	\$6,297.80
4 Months Ago:	09/2024	\$6,250.43
3 Months Ago:	10/2024	\$8,208.64
2 Months Ago:	11/2024	\$5,240.08
Last Month:	12/2024	\$5,442.40
	Average per month:	\$6,225.31

Debtor 1 Jerry Dawson Freeman
Debtor 2 Savanna Nicole Freeman

Case number (if known)

### **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period 07/01/2024 to 12/31/2024.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Tuscaloosa County Board of Education

Income by Month:

6 Months Ago:	07/2024	\$4,053.58
5 Months Ago:	08/2024	\$4,053.58
4 Months Ago:	09/2024	\$4,053.58
3 Months Ago:	10/2024	\$4,134.67
2 Months Ago:	11/2024	\$4,044.67
Last Month:	12/2024	\$4,089.67
	Average per month:	\$4,071.63

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation
\$24	5 f	iling fee
\$78	3 a	dministrative fee
+ \$15	5 t	rustee surcharge
\$338	3 t	otal fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
_	¢313	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

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#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court** Northern District of Alabama

In	re	Jerry Dawson Freeman Savanna Nicole Freeman	Case No.	
		Debtor(s)	Chapter	13
		DISCLOSURE OF COMPENSATION OF ATTO	ORNEY FOR DE	CBTOR(S)
1.	coı	rsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attompensation paid to me within one year before the filing of the petition in bankruptor rendered on behalf of the debtor(s) in contemplation of or in connection with the base.	y, or agreed to be paid	to me, for services rendered or to
		For legal services, I have agreed to accept	\$	4,500.00
		Prior to the filing of this statement I have received	\$	0.00
		Balance Due	\$	4,500.00
2.	Th	e source of the compensation paid to me was:		
		Debtor Other (specify):		
3.	Th	e source of compensation to be paid to me is:		
		☐ Debtor	FIRMED PLAN PAYN	MENTS
4.	✓	I have not agreed to share the above-disclosed compensation with any other person	on unless they are meml	pers and associates of my law firm
5.	a. b. c. d.	I have agreed to share the above-disclosed compensation with a person or persons copy of the agreement, together with a list of the names of the people sharing in the return for the above-disclosed fee, I have agreed to render legal service for all aspective and the debtor's financial situation, and rendering advice to the debtor in desperation and filing of any petition, schedules, statement of affairs and plan whise Representation of the debtor at the meeting of creditors and confirmation hearing, [Other provisions as needed]  The requested "no look" fee includes all matters set forth as requirements in the Administrative Order.  If this Chapter 13 is dismissed prior to Confirmation of the Chapter 13 plan, In attorney fees from funds paid to the Chapter 13 Trustee, without further Attorney may receive attorney fees exceeding \$1,000.00 but less than or equal this case as set out above, from funds paid to the Chapter 13 Trustee, by App.	he compensation is atta ects of the bankruptcy c etermining whether to a ch may be required; and any adjourned hear Local Rules and appli Attorney may receive Application to the Coul	ched. ase, including: file a petition in bankruptcy; rings thereof; acable up to \$1,000.00 rt. fees sought for
6.	Ву	fourteen (14) days of Dismissal Order.  agreement with the debtor(s), the above-disclosed fee does not include the followi The requested fee excludes any service not expressly set out as required for th Administrative Orders.		Local Rules or applicable
		The requested fee expressly excludes negotiation of mortgage modification ag	reements.	
		The requested fee does not include any fees that may be charged in connection Chapter 7	n with converting this	Chapter 13 case to a cause under

In	re

Jerry Dawson Freeman Savanna Nicole Freeman	Case No.	
Debtor(s)		

## DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

	CERTIFICATION
I certify that the foregoing is a complete state this bankruptcy proceeding.	ement of any agreement or arrangement for payment to me for representation of the debtor(s) in
January 9, 2025	/s/ Andrew D. Poston
Date	Andrew D. Poston POS015
	Signature of Attorney
	Brock and Stout
	PO Box 311167
	Enterprise, AL 36331
	(334) 393-4357 Fax: (334) 393-0026
	bankruptcy@brockandstout.com
	Name of law firm

# **United States Bankruptcy Court** Northern District of Alabama

In re	Jerry Dawson Freeman Savanna Nicole Freeman		Case No.	
		Debtor(s)	Chapter	13
Γhe ab		RIFICATION OF CREDITOR N		of their knowledge.
Date:	January 22, 2025	/s/ Jerry Dawson Freeman  Jerry Dawson Freeman		
		Signature of Debtor		
Date:	January 22, 2025	/s/ Savanna Nicole Freeman Savanna Nicole Freeman		
		Signature of Debtor		

Santander Consumer ATTN: Bankruptcy Dept PO Box 560284

Dallas, TX 75356

Capitol One PO Box 30285

Salt Lake City, UT 84130-0285

LVNV Funding PO Box 10587 Greenville, SC 29603

Shellpoint Mortgage Servicing

Newrez

PO Box 10826

Greenville, SC 29603-0826

Citizens Bank PO Box 42111 Providence, RI 02940 Portfolio Recover Associates

PO Box 12914 Norfolk, VA 23541

Internal Revenue Service

PO Box 7346

Philadelphia, PA 19101-7346

Credit Collection Service

PO Box 773

Needham Heights, MA 02494

Portfolio Recover Associates

PO Box 12914 Norfolk, VA 23541

State of Alabama Dept of Revenue

Legal Division PO Box 320001

Montgomery, AL 36132-0001

Credit Corp Solutions 2012 Berryhill Rd Montgomery, AL 36117 Portfolio Recover Associates PO Box 12914

Norfolk, VA 23541

Tuscaloosa County Tax Assessor 714 Greensboro Ave RM 108

Tuscaloosa, AL 35401

Credit First / Firestone

PO Box 81083 Cleveland, OH 44181 Resurgent / LVNV Funding

PO Box 1269 Greenville, SC 29602

Alabama Credit Union PO Box 862998

Tuscaloosa, AL 35486-0027

Department of Ed/Aidvantage

Po Box 9635

Wilkes Barre, PA 18773

Sheffield Financial PO Box 1704

Clemmons, NC 27012-1704

Alabama Power Company c/o Teresa Black, Registered Agent

600 North 18th Street Birmingham, AL 35203

First Credit Corporation

PO Box 9300 Boulder, CO 80301 Alabama Credit Union 220 Bryant Drive Tuscaloosa, AL 35401

AT&T Services, Inc.

One AT&T Way, Room 3A104 Bedminster, NJ 07921-2694

First Franklin 1911 Skyland Blvd Tuscaloosa, AL 35405 Amazon Store Card PO Box 81226 Seattle, WA 98108

Caine & Weiner 15025 Oxnard St Ste 100 Van Nuys, CA 91411

Jefferson Capital System Attn: Rhonda Pratt PO Box 7999 Saint Cloud, MN 56302

Capitol One Bank 15000 Capitol One Dr Richmond, VA 23238

Capitol One Bank 15000 Capitol One Dr Richmond, VA 23238

Citibank PO Box 6497 Sioux Falls, SD 57117-6497

Comenity - Victoria's Secret PO Box 659728 San Antonio, TX 78265

Geico Insurance One Geico Blvd Fredericksburg, VA 22412

Progressive Casualty PO Box 94523 Cleveland, OH 44101-4523

Syncb / Wal-Mart ATTN: Bankruptcy Dept PO Box 965060 Orlando, FL 32896-5060

Synchrony Bank PO Box 965036 Orlando, FL 32896-5036

US Attorney 1801 4th Ave N Birmingham, AL 35203